FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000048900 (1)

WESCAR I. REALTY, INC.

Mailing Address

Principal Place of Business

SIGNATURE:

FILED Apr 21 1998 8:00am Secretary of State



| 2358 N. WESTMONTE DATVE | 2358 N. WESTMONTE DRIVI SUITE-200 | E | | | |
|--|---|--|--|-----------------------|------------------------|
| ALTAMONTE SPRINGS FL 32714 | | | DO NOT WRITE IN THIS SPACE | | |
| | | | Date Incorporated or Qualified 06/22/1995 | | |
| Principal Place of Business | 2a. Mailing Address | 1-1 | # ECt Number | - A | pplied For |
| 21 375 Douglas Hve. | | glas Au | 59-3322816 | N. | lot Applicable |
| Suite, Apr. 11 etc 2006 | Suite Apt. #, etc. | 06 | 5. Certificate of Status Desired | | Additional lequired |
| 23 AUTAMONTE Spys, FL | City & State 28 ACTA MONTES | SASS F | 6. Election Campaign Financing Trust Fund Contribution | | May Be to Fees |
| 24 \$ 2714 25 Semino/e | 29 32714 3 | Country (1.5 | 8. This corporation owes or has particular to the Personal Property Tax due June | | itangible No |
| g, Name and Address of Curren | t Registered Agent | | 10. Name and Address of New Re | gistered Agent | |
| GEYS, LOUIS | | 61 Name | | | |
| 2050-N-WEOTMONTE-DRIVE 3 | 75 Douglas Au wite 2006 | B2 Street | Address (P.O. Box Number is Not Acceptal | ple) | |
| ALTAMONTE SPRINGS FL 32714 | | 83 | | 1 0 21 | |
| | | 84 City | And the second s | FL T | Code |
| Pursuant to the provisions of Sections 607,0502 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation | and 607.1508, Florida Statutes, of Florida. Such change was autilions of Section 607.0505, Florid | the above-named horized by the corp la Statutes. | corporation submits this statement for the poration's board of directors. I hereby acce | pt the appointment as | registered |
| SIGNATURE Styriature typed or printed name of a standa ager | of and fille if applicable (NOTE R | egistered Agent signature | required when reinstating) | 4-15-98 DATE | |
| 12. OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFIC | | |
| THLE D | ☐ DELETE | 11 TITLE | | Change | Addition |
| NAME GEYS, LOUIS 375 | | 1.2 NAME | | | _ |
| STREET ADDRESS 2350 W. WEOTHICHTE DRIVE | OUTE 200 STE. 2006 | 1.3 STREET ADDRESS | | | |
| CITY-ST-ZIP ALTAMONTE SPRINGS FL 327 | 114 | 1.4 CITY-ST-ZIP | | | |
| TITLE PRESIDENT | DELETE | 2.1 TITLE | | Change | Addition |
| NAME NOEL MOENSSEN | 5 | 2.2 NAME | | | |
| NAME STREET ADDRESS 375 DOLLGEAS AVE | , STE. 2006 _ | 2.3 STREET ADDRESS | | | |
| CITY-ST-ZIP ALTH MONTE SPES P | 6 32714 | 2 4 CITY - ST - ZIP | • | | Ì |
| TITLE | ☐ DELETE | 3.1 TITLE | | Change | Addition |
| NAME | | 32 NAME | | | |
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| STREET ADDRESS | | 5.3 STREET ADDRESS | | | ! |
| CITY-ST-7IP | | | | | |
| THE THE | DELETE | 54 CITY-ST-ZIP 61 TITLE | | Change | Addition |
| NAME | Orceit | 1 | | L_1 change | |
| STREET ADDRESS | | 6.2 NAME | | | ĺ |
| | | 6.3 STREET ADDRESS | | | |
| CITY-ST-ZIP 14. Thereby certify that the information supplied with | h this filing does not qualify for the | 6.4 CITY-ST-ZIP | Lin Continue 440 07/0VD Florida Octable 1 | | |

Indicated on this annual report or supplied with this filling does not quality for the exemption stated in Section 1.19.07(3)(i), Florida Statutes. Flurther certify that the information indicated on this annual report or supplieries that annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.