

MAY 1ST IS \$550.00

FILED

Feb 09, 1999 8:00am

Secretary of State

02-09-1999 90014 043 \*\*\*150.00

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000069031

1. Corporation Name
SHAMROCK REALTY OF TALLAHASSEE, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 2121 KILLARNEY WAY SUITE G TALLAHASSEE FL 32308
Mailing Address: 2121 KILLARNEY WAY SUITE G TALLAHASSEE FL 32308

3. Date Incorporated or Qualified: 09/07/1995
4. FEI Number: 59-3334734
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: BOND, NATHAN L, 2121 KILLARNEY WAY SUITE G, TALLAHASSEE FL 32308

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code.

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with 6 rows and 2 columns for Officers and Directors (12). Columns include Title, Name, Street Address, and City-ST-ZIP. Includes entry for PD BOND, NATHAN L.

Table with 6 rows and 2 columns for Additions/Changes to Officers and Directors in 12 (13). Columns include Title, Name, Street Address, and City-ST-ZIP.

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath...

SIGNATURE: [Signature] DATE: 1/19/99 DAYTIME PHONE #: 906-9000

CR2E034 (11/98)