2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 24, 2000 8:00 am Secretary of State DOCUMENT # P97000072706 1. Entity Name FRANK G. CANTY REALTY, INC. 01-24-2000 90106 006 ***150.00 Principal Place of Business Mailing Address 100 S. SEMORAN BLVD., SUITE B 100 S. SEMORAN BLVD., SUITE B ORLANDO FL 32807-3231 ORLANDO FL 32807 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3461969 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CANTY, FRANK G Street Address (P.O. Box Number is Not Acceptable) 3220 LAKESHORE CT. ORLANDO FL 32803 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Atter MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change Addition TITLE Delete TITLE CANTY, FRANK G NAME NAME 3220 LAKESHORE CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803 Addition ☐ Delete TITLE ☐ Change $\leq r \cdot \leq r \leq 7$ NAME (i)3: STREET ADDRESS STREET ADDRESS 18 1 1 1 CITY-ST-ZIP ' * CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITI F TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME . NAME 163 a 19 1 . In 1 . 5 STREET ADDRESS STREET ADDRESS

indicated on this report or supplemental 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 11 or Block 12 if changed; or on an attachment with an address, with all other ke empowered.

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13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

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