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**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 5
1. Corporation Name
BEHLOR REALTY, INC.

(6)

**FILED** Apr 14 1998 8:00am Secretary of State

|--|--|--|--|--|--|

| Principal Pla   | ice of Business                                    | Mailing A         | ddress                                |                              | •               | 1 142 11416 116 11611 14414 11611 14111 4811 41411 41411 41411 41411 41411 41411 41411 41411 41411 41411 41411   |
|---|--|-------------------|---------------------------------------|------------------------------|-----------------|--|
| 4545 PLEASANT HILL RD                                     |  | 4545 PLE          | 4545 PLEASANT HILL RD                 |                              |                 |  |
| SUITE 104 SUITE 104 KISSIMMEE FL 34759 KISSIMMEE FL 34759 |  |                   |                                       | DO NOT MOTE IN THIS SPACE    |                 |  |
| US  | FL 34739   | US                | EE FL 34/39                           |                              |                 | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  |
|   |  | <del>-</del> -    |                                       |                              |                 | 01/23/1991   |
|   | Place of Business                                  | 2a. Mailing       | g Address                             |                              |                 | 4. FEI Number Applied For  |
| 21  |  | 26                |                                       |                              |                 | 59-3049412 Not Applicable  |
| Suite, Ap   | I. ₩, etc.   | —                 | Apt. #, etc.                          |                              |                 | 5. Certificate of Status Desired \$8.75 Additional Fee Regulred  |
| City & Sta  | ate  | 27 City &         | State                                 |                              |                 |  |
| 23  |  | 28                | Claic                                 |                              |                 | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees   |
| Zip   | Country  | Zip               | · · · · · · · · · · · · · · · · · · · | Countr                       |                 | 8. This corporation owes or has paid the current year Intangible   |
| 24  | 25   | 29                |                                       | 30                           |                 | Personal Property Tax due June 30.  Yes No   |
|   | 9. Name and Address of Currer                      |                   |                                       |                              |                 | 10. Name and Address of New Registered Agent   |
| U   | ulich, steven                                      |                   |                                       | 81                           | Name            |  |
| 10  | D69 MAIN ST  |                   |                                       | 82                           | Stroot          | Address (P.O. Box Number is Not Acceptable)  |
| S   | EBASTIAN FL 32958                                  |                   |                                       | "                            | 311001          | Address (F.O. Dox Harmoer is Not Acceptable)   |
|   |  |                   |                                       | 83                           |                 |  |
|   |  |                   |                                       | 84                           | City            | 85 Zip Code  |
|   |  |                   |                                       | I -                          | "               | FL     '   |
| 11. Pursuan   | to the provisions of Sections 607.050              | 2 and 607 1508    | 3, Florida Statute                    | s, the abov                  | e-named         | corporation submits this statement for the purpose of changing its registered  |
| agent. I  | am familiar with, and accept the oblig             | ations of, Sectio | n change was a<br>n 607.0505, Flo     | uinorizea b<br>rida Statute  | y the cor<br>s. | poration's board of directors. I hereby accept the appointment as registered   |
| SIGNATURE   | _<br>:   |                   |                                       |                              |                 |  |
|   | Signature, typed or printed name of registered age |                   | ile (NO1£                             | Registered Ag                | nulsngia Ine    | e required when reinstating) DATE  |
| 12.   | OFFICERS AN  | D DIRECTORS       |                                       | 13.                          |                 | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |
| TITLE   | 1  |                   | ☐ DELETE                              | 1.1 TITLE                    |                 | Change Addition  |
| NAME  | LANGHAM, STEPHEN                                   |                   |                                       | 1.2 NAME                     |                 |  |
| STREET ADDRESS  |  |                   |                                       | 1.3 STREE                    | ADDRESS         |  |
| CITY-ST-ZIP   | KISSIMMEE FL                                       |                   |                                       | 1.4 CITY-5                   | ST-ZIP          |  |
| TITLE   | LULICH, STEVEN                                     |                   | ☐ DELETE                              | 2.1 TITLE                    |                 | Change Addition  |
| NAME  | 4000 BANK OT                                       |                   |                                       | 2.2 NAME                     |                 |  |
| STREET ADDRESS  | SEBASTIAN FL                                       |                   |                                       | 2.3 STREE                    |                 |  |
| CITY-ST-ZIP   | OCONSTRATTE  |                   | Dever                                 | 2.4 CITY-                    | ST-ZIP          |  |
| TITLE   |  |                   | ☐ DELETE                              | 3.1 TITLE                    |                 | L_I Change L_I Addition  |
| NAME<br>CARGET ADDRESS                                    |  |                   |                                       | 3.2 NAME                     |                 |  |
| STREET ADDRESS  | ` <b> </b>   |                   |                                       | 3.3 STREET                   |                 |  |
| CITY-ST-ZIP<br>TITLE                                      | <del> </del>                                       |                   | DELETE                                | 3.4. CITY-<br>4.1 TITLE      | SI-ZIP          | Change Addition  |
| NAME  |  |                   | - Deterie                             | 4.1 IIILE<br>4.2 NAME        |                 | E croude   |
| STREET ADDRESS  |  |                   |                                       | 4. 2 NAME                    |                 |  |
| CITY-ST-ZIP   | ` <b> </b>   |                   |                                       | 4.3 STREE                    |                 |  |
| TITLE   |  | <del></del>       | DELETE                                | 5.1 TITLE                    | 11-ZIP          | Change Addition  |
| NAME  |  |                   |                                       | 5.2 NAME                     |                 | Li vinango Li ridullidii   |
| STREET ADDRESS  |  |                   |                                       | 5.3 STREET                   | AUDRESS         |  |
| CITY-ST-ZIP   |  |                   |                                       | 5.4 CITY-5                   |                 |  |
| TITLE   | <del>                                     </del>   |                   | DELETE                                | 5.4 CHY-3                    | )1 - CIL.       | ☐ Change ☐ Addition  |
| NAME  |  |                   |                                       | 62 NAME                      |                 | Onlings Addition   |
| STREET ADDRESS  | ŀ  |                   |                                       | 6.3 STREET                   | ADDRESS         |  |
| CITY-ST-ZIP   |  | -                 | _                                     |                              |                 |  |
| 14. I hereby  | certify that the information supplied w            | ith unis filma/do | es not qualify fo                     | 1 6.4 C/TY-5<br>If the exemp | tion state      | ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information   |
| Indicate  | d an this annual terrort or supplement:            | d Abbuual Korkort | ieltrue and acci                      | rete and th                  | at my eig       | gnature shall have the same legal effect as if made under oath; that I am an<br>s required by Chapter 607, Florida Statutes; and that my name appears in |
| Block 12  | or Block 13 if changed, or on an alta              | chappit with an   | address                               | Vacate tuls                  | report as       | s required by Chapter out, Florida statutes; and that my name appears in   |

**SIGNATURE:** 

(407) 870 - 2371