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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V35105

(8)

DYNASTY REALTY OF BREVARD, INC.

FILED
May 02 1997 8:00am
Secretary of State



Principal Place of Business Mailing Address									M 01011 1001		
478 BALLARD DRIVE SUITE 27 MELBOURNE FL 32935 US			476 BALLARD DRIVE SUITE 27 MELBOURNE FL 32935-6851 US								
							3. Date Incorporated or Qualified 3a. Date of Last R 05/08/1992 04/26/1996				
2. Principal Pi	lace of Business	2a	. Mailing Address				4. FEI Number	J		Applied For	
21			26				<b>59-3125962</b> Not Appli			Not Applicable	
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State			City & State				Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country		Zip	Cou	intry	,	8. This corporation has liability for in			s. 199.032,	
24	25	29		30					No		
	9, Name and Address of Curren	t Regi	stered Agent		-	T	10. Name and Address of New Re	gistered A	gent		
	N, HENRY M				81	Name					
478 BALLARD DR, SUITE 27 MELBOURNE FL 32935						Street Add	ress (P.O. Box Number is Not Acceptable)				
,					83						
					84	City		FL	<b>85</b> Zi	p Code	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblige	of Flar	ida. Such change was a	authorize	d b	v the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of	changing intment	g its registered as registered	
SIGNATURE	Stonature, typed or printed name of registered agri		_				red when reinstating)	DATE	·		
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECT	ORS IN 12	
TITLE	DP		DELETE	111	1LF				Chang	e 🔲 Addition	
NAME	ALLEN, HENRY M			1.2 N	AME						
STREET ADDRESS						r address					
CITY-ST-ZIP	MELBOURNE FL			14C	TY-	S1 - ZIP					
TITLE			☐ DELFTE	211				ŀ	Chang	e L Addition	
NAME				22 N	AME						
STREET ADDRESS				2.3 S	TREE	ADDRESS					
CITY-ST-ZIP			T ou cas			ST-ZIP			Chann	a Ladition	
TITLE			DELETE	3.11					Chang	e L_J Addition	
NAME				3.2 N							
STREET ADDRESS						T ADDRESS					
CITY-ST-ZIP			DELETE			S1-7IP		<del></del>	Chang	e	
TITLE			טנגנונ יי	4.1 T				'	L VIIII)	יווטוווטוז א	
NAME				4.21							
STREET ADDRESS						1 ADDRESS					
CITY-ST-ZIP TITLE			DELETE	4.4 C		\$1 - Z(P			Chang	e Addition	
			ottere	5.2 N				'			
NAME CTOCET ADDOCCC						T ADDRESS					
STREET ADDRESS						}					
CITY-ST-ZIP			DELETE	5.4 C 6.1 T		ST-7IP			Chang	e Addition	
TITLE				6.1 t					0110115		
NAME OTDEST ADDRESS	1					T ADDDDEAG					
STREET ADDRESS				i i		T ADDRESS					
CITY-ST-ZIP	by partify that the information remains	اللازين الم	this filing does not avail			S1-ZIP	d in Section 119.07(3)(i), Florida Statute	s I further	cortify #	nat the	

4. I do 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, that I am an officer or director of the corporation or the received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or 80 ck 13 if changed, or on an attachment with an address.

MANATURE.

Mak ma All - Ohlaid

4-24-97

407-254-1115