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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # 1
1. Corporation Name

CITY-ST-ZIP

125874

(8)

BELLEMEAD REALTY, INC.

FILED

Mar 20 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address

2990 SOUTH ATLANTIC AVENUE
2990 SOUTH ATLANTIC AVENUE
DAYTONA REACH SHOPES EL 32118-002

990 SOUTH ATLANTIC AVENUE 2990 SOUTH ATLANTIC AVENUE AYTONA BEACH SHORES FL 32118-6002 DAYTONA BEACH SHORES FL 32118-6002		002	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
					02/23/1932		
2. Principal Place of Business	2a. Mailing Address	•	v 'r	4.	FEI Number	F	Applied For
21 4000 Old Divie Highway	1 ₅₆ 7000 019 011	6 T.	nghwey		59-1004689		Not Applicable
Suite, Apt. #, etc. 0	Suite, Apt. #, etc.		0 0	5.	Certificate of Status Desired	-	75 Additional se Required
City & State 23 Ground Beach 7L	City & State 28 Ormand Beac	h	7L		Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees
Zip Country 24 B2174 25 Volusia	Zip Cou 29 332174 30 V	intry	usia			Yes	ar Intangible
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
TUMBLESON, J DOYLE 150 S.PALMETTO AVE. DAYTONA BEACH FL 32014		81	Name				
		82	82 Street Address (P.O. Box Number is Not Acceptable)				
		83					
		84	City		FL	85	Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							

SIGNATURE Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PTD DELETE Change Addition 1.1 TITLE TITLE **UANINO. ANTHONY** 1.2 NAME NAME 2990 S ATLANTIC AVE STREET ADDRESS **DAYTONA BCH SHORES FL** CITY+ST-ZIP 1.4 CITY-ST-ZIP Addition DST DELETE 2.1 TITLE Change **UANINO, ANTHONY** 2.2 NAME NAME 2990 SOUTH ATLANTIC AVE STREET ADDRESS 2.3 STREET ADDRESS DAYTONA BEACH SHORES FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE JENSEN, ALFRED 3.2 NAME 2970 SOUTH ATLANTIC AVE 3.3 STREET ADDRESS STREET ADDRESS DAYTONA BCH SRHS,FL00000 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE COLLINS, ANN 4. 2 NAME NAME 2990 S ATLANTIC AVE 4.3 STREET ADDRESS STREET ADDRESS DAYTONA BCH SHORES FL 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE JENSEN, ALFRED 5.2 NAME NAME 2990 S ATLANTIC AVE 5.3 STREET ADDRESS STREET ADDRESS DAYTONA BCH SHORES FL 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

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 suppliemental 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 of chapter or on an attachment with an address.

6.4 CITY - ST - ZIP

R2E034 (10/97)