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03-10-1999 90245 031 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # 208035 Name RNLEY REAL ESTATE, INC.				
Principal Place	of Business	Mailing Address		((BAI) finnt anier (Bitt abien itter aus merra	1911 81811 81811 81811 91811 1881
1203 N. DIXIE F LAKE WORTH F US	IW Y	1203 N. DIXIE HWY LAKE WORTH FL 33460 US		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
				12/06/1957	
2 Principal Pl	ace of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		59-0817068	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Int	
24	25	29 3	0	Personal Property Tax.	☐Yes ☐No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	Agent
			81 Name		
FEARNLEY, JOSEPH			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
1203 N DIXIE					
LAKE	E WORTH FL 33460		83		
			84 City	FL	85 Zip Code
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. 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 OATE OATE					
_	Signature, typed or printed name of registered agen		Registered Agent signature required	ADDITIONS/CHANGES TO OFFICERS AF	ID DIRECTORS IN 12
12.		DELETE	13.	ADDITIONS/CHANGES TO OFF TOLKS AL	☐ Change ☐ Addition
TITLE	TP CEARMINE LOCERLY	D PETELE	1.2 NAME		
NAME	FEARNLEY, JOSEPH		1.3 STREET ADDRESS		
STREET ADDRESS	1203 N. DIXIE				
C/TY-ST-ZIP	LAKE WORTH FL	☐ DELETE	1,4 CITY-ST-ZIP 2,1 TITLE		☐ Change ☐ Addition
TITLE	SV IOSEBULE		22 NAME		 -
NAME	FEARNLEY, JOSEPH E.		2.3 STREET ADDRESS		
STREET ADDRESS	1203 N. DIXIE LAKE WORTH FL		2.4 City-St-ZiP		ì
CITY-ST-ZIP	\/D	☐ DELETE	3.1 TITLE	NO LONGER WIT	™ Change
NAME	PYMS, JACK	LETE	3.2 NAME	WALDNOTER WIT	rit
STREET ADDRESS	1900 N PIVE DE	LEIL	3.3 STREET ADDRESS	NO TIPM AS AF	12/31/98
CITY-ST-ZIP	-LAKE WORTH-FL		3.4, CITY-ST-ZIP	OUR FIRM HOUSE	7 /
TITLE	Date World	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		,
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STDEET ANDDESS	1		6.3 STREET ADDRESS		

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; 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 13 if changed, or on an attachment with an address, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

AME OF SIGNING OFFICER OR DIRECTOR