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 #

Principal Place of Business

314516

(6)

PLUM REALTY, INC.

Mailing Address

FILED May 12 1998 8:00am Secretary of State



4597 LAKE DR. BOYNTON BEACH FL 33436		4597 LAKE DR. BOYNTON BEACH FL 33436		DO NOT WRITE IN THIS SPACE	
U\$		US		3. Date Incorporated or Qualified	SPACE
				03/09/1967	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 660 F	OUNTAINHEAD LANE	26 660 FOUNTA	INHEAD LAN	E 59-1212730	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		8. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 NAPLE		28 NAPLES, FL		Trust Fund Contribution	Added to Fees
Zip 24 34103	Country	2φ 34103 3	Country	8. This corporation owes or has paid the cu	' '
24 34 1 0 3	25 9. Name and Address of Current		30	Personal Property Tax due June 30. 10. Name and Address of New Registered	LX Yes
Di I		negistered Agent	81 Name	10. Name and Address of New Negistered	ı wâatır
FLUM, MIUTACL N.					
4597 \$. LAKE DR. BOYNTON BEACH FL 33436				dress (P.O. Box Number is Not Acceptable)	
БО	INION DEACH PL 33430		83	60 FOUNTAINHEAD LANE	
			**		
			84 City		85 Zip Code
44 Durement	to the province of Sections 607 01.03	and 607 1609 Elwide Statutes		APLES reporation submits this statement for the purpose of	
office or re agent I ar	egi stere d agent, or both, in the State of m fami fiar with, and accept the obligati	f Horida, Such change was au ons of, Section 607.0505, Flori	ithorized by the corpora ida Statutes.	ation's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	Signature, typed or printed name of registered agents	and thin if applicable (NOTE	Registered Agent's gnature requ	ired when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PS	DELFTE	1.1 TALE		
NAME	PLUM, MICHAEL K.		1.2 NAME		
STREET ADDRESS	4597 S. LAKE DR.		1.3 STREET ADDRESS	660 FOUNTAINHEAD LANE	
CITY-ST-ZIP	BOYNTON BEACH FL			NAPLES, FL 34103	
TOLE	VPT	DELETE	2.1 TITLE		X Change Addition
NAME	PLUM, CATHERINE		2.2 NAME		
STREET ADDRESS	4597 S. LAKE DR.		2.3 STREET ADDRESS	660 FOUNTAINHEAD LANE	İ
CITY-ST-ZIP	BOYNTON BEACH FL			NAPLES, FL 34103	
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			34. CITY-SI-ZIP		
TITLE		DELETE	4 1 THLE		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		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		_	6.4 CITY - ST - ZIP		
	ertify that the information supplied with	this filing ses not qualify for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further c	ertify that the information
indicated a officer or o Block 12 c	on this annual report or suppliemental a director of the corporation of the receiv or Bloc k 13 if changed, or an impattach	enual report is true and accur or or true ee empowered to ex ment with an address.	rate and that my signate recute this report as rec	i Section 119.07(3)(i), Florida Statutes. I further c ure shall have the same legal effect as if made u quired by Chapter 607, Florida Statutes; and that	nder oath; that I am an my name appears in