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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio		APARTMENT		(T) TH, INC:					
Principal Plac	e of Business		Ма	iling Address					
437 JEAN ST			437 JEAN ST						
P O BOX 1842			P O BOX 1842				1	DO NOT INDITE IN THE COACE	
DAYTONA BEACH FL 32114-4601			DAYTONA BEACH FL 32114-4601					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
								05/19/1970 ·	
9 Principal P	lace of Business	2a, Mailing Address					4. FEI Number Applied For		
21		26					59-1300092 Not Applicate	ole	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				S8 75 Additional		
22		27					5. Certificate of Status Desired L Fee Required		
City & State	e		City & State				Election Campaign Financing \$5.00 May Be		
23		28					Trust Fund Contribution	_	
Zip	· — — ·		—————————————————————————————————————		\vdash	Country		8. This corporation owes or has paid the current year Intangible	
24	25		29 30 30 t Registered Agent				Personal Property Tax due June 30. Yes No	_	
)AMI			on negisi	ered Agent		81	Name	10. Hame Bito Address of New Registered Agent	-
WILSON, JAMES R. 200 E GRANADA AVE					Ĺ	82			
	MOND BEACH					Street Add	ddress (P.O. Box Number is Not Acceptable)	- 1	
	IMOND DOZON			ł	83	<u>.</u>		ᅥ	
						84			_
				l'			City	FL 85 Zip Code	
11. Pursuant	to the provisions	of Sections 607.05	02 and 60	7.1508, Florida Statut	tes, the ab	ove	e-named co	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	d
office or r	egistered agent, o m fam ilier with, ar	or both, in the Stat nd accept the obli	te of Florid dations of,	a. Such change was Section 607.0505, Fl	authorized orida Stati	by utes	/ the corpora S.	pration's board of directors. I hereby accept the appointment as registered	1
SIGNATURE	·	·							
	Signature, typed or prin	ited name of registered &				Age	ent signature raq	equired when reinstating) DATE	_
12.	PD	OFFICERS A	ND DIREC	OELETE	13,		- T-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	LATOUR, JO	HN .IR		C) ACCEIE	1.1 TIT 1.2 NA		}	Change L Additi)
i i	STREET ADDRESS 124 EMMETT STREET						ADDRESS		
CITY-ST-ZIP DAYTONA BEACH FL									
TITLE	VD	<u></u>		DELETE	1.4 CIT 2.1 TIT		11-211	☐ Change ☐ Additi	on
NAME	HOCCIACIOTED DIMIN ID			2.2 h					
STREET ADDRESS	372 RIVERSI					ADDRESS		ı	
CITY-ST-ZIP ORMOND BEACH FL				2.4(ł		
TITLE	· · - · · · · · · · · · · · · · · ·			☐ DELETE	3.1 TIT			Change Addition	on
NAME				3.2 N			j		J
STREET ADDRESS					3.3 STF	REET	ADDRESS		j
CITY+\$T-ZIP					3.4. CI	TY-\$	ST-ZIP		_}
TITLE				☐ DELETE	4.1 TIT	LE		☐ Change ☐ Additi	on
NAME					4. 2 NA	ME			
STREET ADDRESS					4.3 ST	REET.	ADDRESS		
CITY-ST-ZIP				D per per	4.4 CIT		T-ZIP		ᆜ
TITLE				DELETE	5.1 TIT			Change Additi)N
NAME					5.2 NAI				-
STREET ADDRESS					5.3 STREET ADDA				- 1
CITY-ST-ZIP				DELETE	5.4 CIT		T-ZIP	☐ Change ☐ Addition	02
TITLE				L. DELETE	61 TIT			☐ Change ☐ Addition)II
NAME CORET ADDRESS					6.2 NAI		Paracec		
STREET ADDRESS							ADDRESS		ł

14. Thereby 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 of 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 chapted, or in an accurate and that my are address.

FILED

Mar 27 1998 8:00am

Secretary of State