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

**PROFIT** 

**SIGNATURE:** 

May 18 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 393053 (4) HIGGENBOTHAM REALTY, INC. Principal Place of Business Mailing Address 1686 WILLIAMSBURG SQUARE 1666 WILLIAMSBURG SOUARE LAKELAND FL 33803 LAKELAND FL 33803 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/22/1971 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-1381910 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. X Yes ☐ No 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HIGGENBOTHAM, MARTIN E. 1666 WILLIAMSBURG SQ. 82 Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33803 83 84 City Zip Code 85 11. 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 tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CRZE034 (1097 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change 1.1 TITLE TITLE HIGGENBOTHAM, MARTIN E NAME 1.2 NAME 1738 CLARENDON PLACE STREET ADDRESS 1.3 STREET ADDRESS LAKELAND, FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TIT! F 2.1 TITLE HIGGENBOTHAM, BRENDA L NAME 2.2 NAME 2200 EWELL RD. STREET ADDRESS 2.3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE HIGGENBOTHAM, MARTIN E. 3.2 NAME NAME 2200 EWELL ROAD STREET ADDRESS 3.3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filling 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 servicer or truestore or present as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed. On an attachment with an addisea.

**FILED** 

(941) 644-6681