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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 400528

(6)

DAVID CATTON REALTY, INC.

Principal Place of Business RT 2 BOX 1355 PO BOX 296 MADISON FL 32340		Mailing Address RT 2 BOX 1355 PO BOX 296	RT 2 BOX 1355			Date Incorporated or Qualified 3a. Date of Last Report			
		MADISON FL 32340-9635							
	**************************************				05/01/1972				
—ı `	Place of Business	2a. Mailing Address			4. FEI Number	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ar	pplied For	
		26			59-1390490	59-1390490 Not Applicable			
Suite, Apt. #. etc.		Suite, Apt. #, etc.		÷	6. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	е	City & State			6. Election Campaign Financin	9	\$5.00	May Be	
23	28				Trust Fund Contribution Added to Fees				
Zip	Country Zip Countr		У	8. This corporation has liability for intangible tax under s. 199.032,					
24	25 29 29 9. Name and Address of Current Registered Agent			30 Florida Statutes Yes No					
		rent Registered Agent	81	Name	10. Name and Address of Nev	Registered	Agent		
	ITON,DAVID			INATIO			•		
RT. 2, BOX 1355				82 Street Address (P.O. Box Number is Not Acceptable)					
MAL	DISON FL 32340		83						
				<u> </u>					
			84	City		FL	85 Zip (Code	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607 1508. Florida Statut	les the abou	e-named	corporation submits this statement for t	he purpose of	changing it	te registered	
office or r	registered agent, or both, in the Starm familiar with land accept the ob-	ale of Florida. Such change was :	authorized b	v the con	poration's board of directors. I hereby a	cept the app	ointment as	registered	
SIGNATURE	Signature typed or printed mone of registered	mount and Gradinary and a MATA	C. Danisland A		a required when reinstating)	0.175	* ····································		
12.		AND DIRECTORS	13.	en signature	ADDITIONS/CHANGES TO C	DATE FEICERS AND	DIRECTOR	3S IN 12	
1718	D	⊠ DELETE	1.1 TITLE		7	110010700	Change	Addition	
NAME	DEHLMAN, VIVIAN		1.2 NAME					7	
STREET ADDRESS	RT 1 BOX 1860		1.3 STREE	T ADDRESS	CONNIE RIZAVES RT#1 BOX/45 PINETTA, FL. 3				
CITY-ST-7/P	MADISON FL		1.4 CITY-	ST-7IP	OLNBITA EL 3	2350			
TITLE		☐ DELETE	2.1 TITLE	<u></u>			Change	Addition	
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREE	T ADDHESS "					
CITY-ST-ZIP			2 4 CITY-	ST-ZIP					
TITLE	DELETE		3.1 TITLE				Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	t address					
CITY-ST-ZIF	1 - F1 AMANNA		3.4. CITY-	ST-ZIP			•		
TITLE	☐ DEFELE		4.1 TITLE			······································	Change	Addition	
NAME			4. 2 NAME						
STREET ACCRESS			4.3 STREE	T ADDRESS					
CRY-ST-ZIP		T Ac. At-	4.4 CITY	ST-ZIF					
TITLE		L_J DELETE	5.1 TiTL€				L Change	Addition	
NAME			5.2 NAMÉ						
STREET ADDRESS				T ADDRESS					
DiTY+ST+ZiP		1 or ere	5.4 CITY-	ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				L. Change	Addition	
NAMÉ PROSE ADERES			6.2 NAME						
STREET ADDRESS				I ADDRESS					
14. Ldo heret	ny certify that the information even	had with this filma door not awall	fy for the ex	mption e	Lated in Section 119.07(3)(i), Florida Sta	tuton I formal	onetif. the	tho	
informatio Lam an of	on indicated on this annual report of the corporation	or supplemental annual report is to or the receiver or trustee emponents	rue and acc rered to exec	urate and	that my signature shall have the same report as required by Chapter 607, Flori	icies, i furiner egal elfect as da Statutes: ai	if made und nd that my r	trie der oath; that name	
appears ii	n Block 12 or Block 13 / ghanged	or on attrohment with an add	dress.			,			

SIGNATURE:

INATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

901973-2039

FILED

Feb 06 1997 8:00am

Secretary of State