FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # 402415 VILLASOL REALTY CO. Principal Place of Business Mailing Address 1326 MALABAR RD SE 1 1326 MALABAR RD SE 1 PAUM BAY FL 32907-9502 PALM BAY FL 32907-9502 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/05/1972 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-1525850 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired City & State City & State 6. Election Campaign Financing 23 Trust Fund Contribution 28 Ζip Country Zφ Country 8. This corporation owes or has paid the current year latengible 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TIETIG, EDWARD C. 1326 MALABAR RD SE 1 Street Address (P.O. Box Number is Not Acceptable) PALM BAY FL 32907 83 84 **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE TITLE TIETIG, EDWARD C. NAME 1.2 NAME 1326 MALABAR RD SE 1 STREET ADDRESS 1.3 STREET ADDRESS PALM BAY FL CITY-ST-2IP 1.4 CITY - ST-ZIP

FILED Apr 15 1998 8:00am Secretary of State



Zip Code 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition DELETE Change Addition TITLE 2.1 TITLE **FOX. JUDY** NAME 2.2 NAME 1326 MALABAR RD. S.E. STREET ADDRESS 2.3 STREET ADDRESS PALM BAY FL CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-ZIP DELETE Change TITLE 5.1 TOLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

CITY-ST-ZIP 6.4 CITY - ST - ZIP 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 armual 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 charges on an attachment with an address.

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

TITLE

NAME

STREET ADDRESS

11/0/10

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes

Change

Addition

Not Applicable