

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 412668

1. Corporation Name

THOR REALTY CORP

Principal Place of Business

971 E. TENNESSEE STREET
TALLAHASSEE FL 32308-6939 6908

Mailing Address

971 E. TENNESSEE STREET
TALLAHASSEE FL 32308-6939 6908

2. Principal Place of Business

21 971 BRIARCLIFF RD
Suite, Apt #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 971 BRIARCLIFF RD
Suite, Apt #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

CONGLIO, MICHAEL J

971 E. TENNESSEE STREET
TALLAHASSEE FL 32308-6939 6908

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 971 BRIARCLIFF RD

84 City

FL 85 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(Date) Registered Agent Signature, typed or printed name, and title if applicable

(Date)

12. OFFICERS AND DIRECTORS

TITLE P [] DELETE

NAME CONIGLIO, PHILIP J
STREET ADDRESS 971 E. TENNESSEE STREET
CITY-ST-ZIP TALLAHASSEE FL 32308-6939

TITLE S [] DELETE

NAME CONIGLIO, ANNA G.
STREET ADDRESS 1370 LAKE CLAY DR.
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE AS [] DELETE

NAME CONIGLIO, MICHAEL
STREET ADDRESS 971 E. TENN ST
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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****150.00 ****150.00

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14. I hereby 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 supplement to 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL J. CONIGLIO

850 681 3111

0031785

CR2E034 (11/98)

FILED

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SECRETARY OF STATE



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/13/1972

4. FEI Number

59-1424419

Applied For
Not Applicable

5. Certificate of Status Desired []

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution []

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax [] Yes [] No

10. Name and Address of New Registered Agent