## 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 # 469704

(1)

Mailing Address

YOUNG REALTY CORP.

Principal Place of Business

FILED Apr 21 1997 8:00am Secretary of State

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=####################################		1969 SARESIAND SERVICE SEZE/ QUITE 200m CORAL - GABLES FL-93146-9047 US			Data Insuranted or Cuplified	to Date of Levi D	on art
		<b>0</b> 0			3. Date Incorporated or Qualified 03/24/1975	3a. Date of Last R 03/19/1996	eport
	Hace of Business  B Air Way Street	2a. Mailing Address 26 12908 Air W	av S	treet	4. FEI Number 59-1582167	} <del>+-</del>	oplied For
Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75	Additional equired
City & State City & State					6. Election Campaign Financing		May Be
23 Panama City, FL 28 Panama City, F					Trust Fund Contribution		to Fees
Zip 24 32404	1-2833 <sub>25</sub> U.S.A.	29 32404-2833	Country o U si		8. This corporation has liability for Florida Statutes	intangible tax under s ☑ Yes  【】No	. 199.032,
24 02 10 .	9. Name and Address of Curren				10. Name and Address of New Re		
HUG	HEY, BONNIE J		81	Name			
	o san remo ave		82	Street A	Address (P.O. Box Number is Not Acceptate	ole) .	****
	239		00	<u> </u>			
COF	RAL GABLES FL 33146-3047		83				
			84	City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607,1508, Florida Statutes	the abov	e-named	corporation submits this statement for the p		ts registered
office or t	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was au	thorized b	v the corp	oration's board of directors. I hereby accep	pt the appointment as	registered
SIGNATURE	Signature itypod or primed name of registered age	nt and title if agrificable (NOTE: I	Registered Ac	ent signature	required when reinstating)	DATE	
12,	OFFICERS ANI		13.	o it organistano	ADDITIONS/CHANGES TO OFFIC		RS IN 12
TOLE	PST	☐ DELETE	11 TITLE		P/S/T	Change	Addition
NAME	YOUNG, JUDITH C		1.2 NAME		Young, Judith C.		
STREET ADDRESS	12908 AIR WAY		1.3 STREE	T ADDRESS	12908 Air Way Stree		
CITY-ST-7IF	PANAMA CITY FL 33	Drutte	1.4 CITY-	ST-ZIP	Panama City, FL 32	404-2833 X Change	Addition
111LF	D   Young, Judith C	DELETE	2.1 TITLE 2.2 NAME		Vounge Tudith C	<del></del>	Mudicion
NAME STREET ADDRESS	12908 AIR WAY			T ADDRESS	Young, Judith C. 12908 Air Way Street	et.	
CHY-SI-ZIF	PANAMA CITY FL 33		2.4 CITY-	1	Panama City, FL 32	404-2833	
TITLE		DELETE	3.1 TITLE	31- EII		Charge	Addition
NAME			32 NAME	-			
STREET ADDRESS			3.3 STREE	T ADDRESS			
City St. 719			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	- [		Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			1	T ADDRESS			
CITY - ST - 7IP		DELETE	4.4 City - 5.1 Title	ST-ZIP		Change	Addition
TILLE NAME		☐ VELCE	5.1 THE 5.2 NAME	.		FT August	Land Models (III)
NAME SYREET ADDRESS				T ADDRESS			
CITY - ST - ZIP			54 CITY-	-			
TITLE		DELETE	61 TITLE	- La		Change	Addition
NAME			€2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 CITY	ST-ZIP			

14. I do 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 angual 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 comporation or the receiver or trustee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4-16-97

(904) 871-5222