

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

FILED
Feb 20, 1999 8:00 am
Secretary of State

02-20-1999 90029 050 ***150.00

DOCUMENT # 473128

1. Corporation Name

FAMILY OF REALTYS, INC.

Principal Place of Business

70 WESTWARD DR
P O BOX 660600
MIAMI SPRINGS FL 33166
US

Mailing Address

70 WESTWARD DR
PO BOX 600
MIAMI SPRINGS FL 33166
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/21/1975

4. FEI Number

59-1661014

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

MOREHOUSE, EARL W.
70 WESTWARD DR
P. O. BOX 660600
MIAMI SPRINGS FL 33266

10. Name and Address of New Registered Agent

81 Name

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

83

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD**
MOREHOUSE EARL W
STREET ADDRESS **70 WEST WARD DR**
CITY-ST-ZIP **MIAMI SPRINGS FL**

TITLE ☐ DELETE

NAME **TREA**
MOREHOUSE GRACE M
STREET ADDRESS **1075 1 BIS AVE**
CITY-ST-ZIP **MIAMI SPRINGS FL**

TITLE ☐ DELETE

NAME **VP**
JENKINS, DORIS M
STREET ADDRESS **140 ROYAL PALM RD #205**
CITY-ST-ZIP **HIALEAH GARDENS FL**

TITLE ☐ DELETE

NAME **S**
OLIVER, JEAN
STREET ADDRESS **1200 FALCON AVE**
CITY-ST-ZIP **MIAMI SPRINGS FL**

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

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)