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

PROFIT CORPORATION ANNUAL REPORT

1999

NEW SOUTH REALTY, INC.

DOCUMENT # 479974

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90053 014 ***150.00

Principal Place	of Business	Mailing Address			•		P			
1112 W MAIN ST UNIT 1-5 LEESBURG FL 34748 US		P. O. BOX 491113 P.O. BOX 49-1113 LEESBURG FL 34749-1113 US				DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed				
00		00				07/02/1975				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Appli	ied For	
•	W. MAIN St.	26				59-1602974	Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 Additional Fee Required			
City & State 23 DEES BURG Fl.		City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip Country		Zip Country				8. This corporation owes the current year Intangible				
24 34748 25 USA-		29		Personal Property Tax.			; <u> </u>	No		
	9. Name and Address of Current	Registered Agent	~~~			10. Name and Address of New Registe	red Agent			
7110				81	Name					
THOMAS, JOHN L II				82	Street Addre	ess (P.O. Box Number is Not Acceptable)				
	east Jackson Street Ando Fl	-								
UNL	ANDO FL			83						
	· ·			1	City		FL	Zip Co		
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	of Florida. Such change wa	as authorized	ร by เก	named corpo ne corporatio	pration submits this statement for the purpos on's board of directors. I hereby accept the a	e of changir ppoin tme nt	ig its re as regis	egistered stered	
SIGNATURE										
	Signature, typed or printed name of registered agent			Agent s	signature required	when reinstating) DATI		СТОВ	9 IN 12	Ś
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS	Chi		Addition	
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NAME	BRAXTON, NORTON O	1.2 N								6
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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 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 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 chapted, or part attachment with an address with all other like empowered.

SIGNATURE: