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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

RAYMOND A. WARNER REAL ESTATE, INC.

Principal Place of Business

99550 OVERSEAS HWY

Mailing Address

99550 OVERSEAS HWY

FILED Mar 19 1998 8:00am Secretary of State



PO BOX 863 KEY LARGO FL 33037		PO BOX 863 KEY LARGO FL 33037		DO NOT WRITE IN THIS	SPACE
_ · / -				3. Date Incorporated or Qualified 03/09/1977	
2. Principal	Place of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		59-1734676	Not Applicable
Suite, Ap	t. #, etc	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ale	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year Intangible
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Registered	Agent
N C	VARNER, RAYMOND A. SR. MLE MARKER 99.5 DVERSEAS HIGHWAY (EY LARGO FL 33037		81 Name 82 Street A 83	ddress (P.O. Box Number is Not Acceptable)	
			84 City	FL	85 Zip Code
11. Pursuan office or agent. I	nt to the provisions of Sections 607.0 registered agent, or both, in the St am familiar with, and accept the of	0502 and 607.1508, Florida S ate of Florida, Such change of oligations of, Section 607.050	tatutes, the above-named owas authorized by the corpost, Florida Statutes.	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the app	changing its registered control as registered
SIGNATURE			(NOTE: Registered Agent signature r		
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PD	☐ DELET	1.1 TITLE		☐ Change ☐ Addition
NAME	WARNER, RAYMOND A SR		1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	KEY LARGO FL	T SUEL	1.4 CITY-ST-ZIP		Change Addition
TITLE	WARNER, RAYMOND A. S	DELET			☐ Change ☐ Addition
NAME	400 DOINT OF CACALITY DO		2.2 NAME		
STREET ADDRESS	KEY LARGO FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETI	2. 4 CITY-\$T-ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME		<u></u>	3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	1		3.4. CITY-ST-ZIP		
TITLE		DELETI			Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	s		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETI	5.1 TITLE		Change Addition
NAME			5 2 NAME	· ·	
STREET ADORESS	3		5.3 STREET ADDRESS	•	
CITY-ST-ZIP		- Intern	5.4 CITY-ST-ZIP	4-	Change Addition
TITLE		DELETI	1		CHANGE TANGUIS
NAME	.1		6.2 NAME		
STREET ADDRESS	⁵		6.3 STREET ADDRESS		
CITY - ST - ZIP	i		6.4 CITY - ST - ZIP		

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 supplimental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.