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Apr 28, 1999 8:00 am
Secretary of State

04-28-1999 90026 028 ***150.00

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PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # 533053

1. Corporation Name

CONDOR PROPERTY MANAGEMENT, INC.

Principal Place of Business

5000 N.W. 27TH COURT, STE E
GAINESVILLE FL 32606

Mailing Address

5000 N.W. 27TH COURT, STE E
GAINESVILLE FL 32606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/05/1977

4. FEI Number

59-1740839

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

81. Name

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

83.

84. City

FL

85. Zip Code

9. Name and Address of Current Registered Agent

SABIS, WILLIAM R
5000 N.W. 27TH COURT, STE E
GAINESVILLE FL 32606

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 PD ☐ DELETE

NAME SABIS, WILLIAM R.
STREET ADDRESS 5000 NW 27TH CT. STE E
CITY-STATE-ZIP GAINESVILLE, FL 00000

TITLE VPT ☐ DELETE

NAME BANES, DEBRA
STREET ADDRESS 5000 NW 27TH COURT STREET EAST
CITY-STATE-ZIP GAINESVILLE FL

TITLE SEC ☒ DELETE

NAME SABIS, REBECCA
STREET ADDRESS 5000 NW 27TH CT STE E
CITY-STATE-ZIP GAINESVILLE FL

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS
CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

CR2E034 (11/98)

4. 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 changed, or on an attachment with an address, with all other like empowered.