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

**PROFIT** Feb 26 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 545296 (6)EDGEWATER CENTURY REALTY, INC. Principal Place of Business Mailing Address 1375 SO FT HARRISON 1375 SO FT.HARRISON P.O. BOX 717 P.O. BOX 717 DO NOT WRITE IN THIS SPACE CLEARWATER FL 34616 CLEARWATER FL 34616 3. Date Incorporated or Qualified 09/15/1977 2. Principal Place of Business Mailing Address 4. FEI Number Applied For PO BOX717 520 D Street 59-1769027 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required ity & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible 45 25 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered 10. Name and Address of New Registered Agent 81 Name MALLORY, GEORGE L. 1375 SO FT.HARRISON Street Address (P.O. Box Number is Not Acceptable) R2 **CLEARWATER FL 33516** 83 84 City Zip Code of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 accept the obligations of Section 607.0505. Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstaling) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OELETE Change Addition TITLE 1.1 TITLE MALLORY, GEORGE L NAME 1.2 NAME Sutte A 500 D Street 1375 S FT HARRISON STREET ADDRESS 1.3 STREET ADDRESS CLEARWATER, FL 00000 1.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY-ST-ZIP DELFTE 3 1 TITLE Change Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE NAME 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETÉ 6.1 TITLE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

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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 supplier 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 processing the second of the secon

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**SIGNATURE:** 

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