## 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 # 547898

(7)

SCOUT REALTY, INC.

**FILED** Apr 27 1998 8:00am Secretary of State

| Principal Place of Business Mailing Address   |  |                     |                     |  | likis didie dibii didik (60) |
|---|--|---------------------|---------------------|--|------------------------------|
| 1723 SE 4TH TERR 1232 SW 4TH COURT  |  |                     |                     |  |                              |
| CAPE CORAL FL 33904 CAPE CORAL FL 33991<br>US US  |  |                     |                     | DO NOT WRITE IN THIS SPACE   |                              |
|   |  | 00                  |                     | 3. Date Incorporated or Qualified  |                              |
|   | Place of Business  CORAL, FL. 33991  |                     |                     | 09/27/1977   |                              |
| 2. Principal F  | Place of Business  | 2a. Mailing Address | <del></del>         | 4. FEI Number  | Applied For                  |
| 21 CAPÉ   | CORAL, FL. 33991   | 26                  |                     | 59-1770705   | Not Applicable               |
|   | #, etc.  | Suite, Apt. #, etc. |                     | 5. Certificate of Status Desired   | \$8.75 Additional            |
| 22 27 27 City & State   |  |                     |                     | C. Continuate of dialog bearing  | Fee Required                 |
| <u> </u>  |  | City & State        |                     | 6. Election Campaign Financing   | \$5.00 May Be                |
| Zip CAP   | Country  | 28                  | Country             | Trust Fund Contribution  | Added to Fees                |
| ·   |  | Zφ                  | Country             | 8. This corporation owes or has paid the curri                               | <u> </u>                     |
| 24 339  | 91 [25] US<br>9. Name and Address of Current   |                     | 90                  | Personal Property Tax due June 30.  10. Name and Address of New Registered A | Yes No                       |
|   |  |                     |                     |  |                              |
| COTTRELL, JAMES L.<br>1612 CAPE CORAL PKWY., SUITE 204  |  |                     |                     |  |                              |
| CAPE CORAL FL   |  |                     | 82 Street           | t Address (P.O. Box Number is Not Acceptable)                                |                              |
| OAFE COME FL  |  |                     | 83                  |  |                              |
|   |  |                     |                     |  |                              |
|   |  |                     | 64 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, byond or printed name of registered agent and tife if applicable (NOTE: Registered Agent signature required when reinstating) DATE   |  |                     |                     |  |                              |
| 12.   | OFFICERS AND   |                     | 13.                 | ADDITIONS/CHANGES TO OFFICERS AND  |                              |
| TITLE   | P  | ☐ DELETÉ            | 1.1 TITLE           | Į l  | Change Addition              |
| NAME  | MEREDITH, A. OWEN  |                     | 1.2 NAME            |  |                              |
| STREET ADDRESS  | 1232 SW 4TH COURT  |                     | 1.3 STREET ADDRESS  |  |                              |
| CITY-ST-ZIP   | CAPE CORAL FL  | D Dever             | 1.4 CITY-ST-ZIP     |  |                              |
| TITLE   | ST MEDERAL MANOE A   | ☐ DELETE            | 2.1 TITLE           | 1  | Change Addition              |
| NAME  | MEREDITH, JANICE S.  |                     | 2.2 NAME            |  |                              |
| STREET ADDRESS  | 1232 SW 4TH COURT  |                     | 23 STREET ADDRESS   |  | 1                            |
| CITY-ST-ZIP<br>TITLE  | CAPE CORAL FL  | DELETE              | 2.4 CITY-ST-ZIP     |  | Observe Takes                |
| NAME  |  | U DECEIE            | 3.1 TITLE           | ļ  | Change Addition              |
|   |  |                     | 3.2 NAME            |  |                              |
| STREET ADDRESS<br>CITY-ST-ZIP   |  |                     | 3.3 STREET ADDRESS  |  |                              |
| TITLE   |  | DELETE              | 3.4. CITY-ST-ZIP    |  | Change Addition              |
| NAME  |  | F-1 Service         | 4.2 NAME            |  |                              |
| STREET ADDRESS  |  |                     | 4.3 STREET ADDRESS  |  |                              |
| CITY-ST-ZIP   |  |                     | 4.4 CITY-ST-ZIP     |  | i                            |
| TITLE   |  | ☐ DELETE            | 51 TITLE            |  | Change Addition              |
| NAME  |  | <del></del>         | 52 NAME             | 1  |                              |
| STREET ADDRESS  |  |                     | 5 3 STREET ADDRESS  | 1  |                              |
| CITY-ST-ZIP   |  |                     | 5.4 CITY-ST-ZIP     | •  |                              |
| TITLE   |  | DELETE              | 6.1 TITLE           |  | Change Addition              |
| NAME  |  |                     | 6.2 NAME            | ]  |                              |
| STREET ADDRESS  |  |                     | 6.3 STREET ADDRESS  |  |                              |
| CITY-ST-ZIP   |  |                     | 6.4 CITY - ST - ZIP | •  |                              |
| 48 I bosobii o  | and it is the at the light control of the light con |                     |                     | 1  |                              |

I nereby 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 an algorithment with an address.

SIGNATURE

4/21/98

941-574-8002