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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

565870

(3)

PRIME REALTY ASSOCIATES, INC.

Country

9. Name and Address of Current Registered Agent

25

6300 PARK OF COMMERCE BLVD.

SWATT, MYRON I.

**BOCA RATON FL 33487** 

Mailing Address

2a. Mailing Address

City & State

Suite, Apt #, etc.

26

28

29

6300 PARK OF COMMERCE BLVD. BOCA RATON FL 33487

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc

City & State

21

22

23

24

Zip

6300 PARK OF COMMERCE BLVD. BOCA RATON FL 33487

	DO NOT WRITE	E IN THI	S SPACE		
3.	Date Incorporated or Qualified				
	02/02/1978				
4.	FEI Number			Applied For	
L	65-0171493			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		
	This corporation owes or has pa Personal Property Tax due June		urrent year	Intangible  No	
10.	Name and Address of New Re	egistere	d Agent		
	O. Box Number is Not Acceptal				

Zip Code

**FILED** 

May 07 1998 8:00am

Secretary of State

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, Soak Florida Statutes, the above-named 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.

Country

81 Name

82

83 | 84 | City

Street Addre

30

SIGNATURE				poration's board of directors, a nereby accept the ap	•	
	Stonature, typind or printed name of registered age of and title if ep-	proble (NOII	Registered Agent signatur	r required when reinstating) DATE		
12.	OFFICERS AND DIRECTO	DRS	13.	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTOR	S IN 12
TITLE	<b>TD</b>	🔀 DELETÉ	1.1 TITLE	TD	Change	Addition
NAME	raible, ronald p.		1.2 NAME	6300 PARE OF Commerce Blod.		,
STREET ADDRESS	6300 PARK OF COMMERCE BLVD.		1.3 STREET ADDRESS	6300 PANE OF Commerce Blod.		
CITY-ST-ZIP	<u>BO</u> CA RATON FL		1.4 CITY-ST-ZIP	BOOM RATOR, A 33487		
TITLE	<b>\$D</b>	DELETE	2 1 TITLE	<i>b D</i>	Change	Addition
NAME	SWATT, MYRON I.		2.2 NAME	SUJAN BALLAND		
STREET ADDRESS	6300 PARK OF COMMERCE BLVD.		2 3 STREET ADDRESS	6300 PARK OF COMMERCE Blue.		
CITY-ST-ZIP	BOCA RATON FL		2 4 CITY-ST-ZIP	BOOK RATIN, PL 33487		
TITLE	PD	DELETE.	3.1 TITLE		Change	☐ Addition
NAME	ANDERSON, JIMMY C		3.2 NAME			
STREET ADDRESS	6300 PARK OF COMMERCE BLVD.		3.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		3.4 CITY-ST-ZIP			ľ
TITLE	CD	DELETE	4.1 TITLE		Change	☐ Addition
NAME	Burgess, Robert		4. 2 NAME			
STREET ADDRESS	6300 PARK OF COMMERCE BLVD.		4.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33487		4.4 CITY-ST-ZIP			
TITLE		DELETE	. 51 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 \$TREFT ADDRESS			•
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			1
STREET ADDRESS			6.3 STREET ADDRESS			

14. Thereby 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 suppliemental 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 of the receiver if 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 chapter 4 attachment with an address.

1/4, 100 ac ,000 call