FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00				F	FILED	
	PROFIT CORPORATION			Ian 21.1	997 8:00am	
1	JAL REPORT		B. Mortham etary of State			
	1997	DIVISION OF CORPORATIONS		Secret	ary of State	
	MENT # 568179 Realty corporation) (6)				
Principal Place of Business C/O KIEFER. DONALD P O BOX 833 ARCADIA FL 33821		Mailing Address C/O KIEFER, DONALD P O 60X 633 ARCADIA FL 34265-0633			· · · · · · · · · · · · · · · · · · ·	
				3. Date Incorporated or Qualified 04/10/1978	3a. Date of Last Report 04/10/1996	
2. Principal P 21	lace of Business	2a. Mailing Address		4. FEI Number 59-1809815	Applied For Not Applicable	
Suite, Apt.	#, etc	Suite Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 City & Stat	e	27 City & State		6. Election Campaign Financing	Fee Required	
23 Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees	
24	25	29	30		Yes No	
VIEC	9. Name and Address of Curre ER, DONALD E	nt Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
ÂRC.	MURPHY ST NW ADIA FL 33367 to the provisions of Sections 607 050 egistered agent, or both, in the State	02 and 607, 1508, Florida Sta e of Florida, Such change wa	83 84 City	Address (P.O. Box Number is Not Acceptal corporation submits this statement for the p poration's board of directors. I hereby acce	FL 85 34266	
agent La SIGNATURE	m familiar with, and accept the oblig		Florida Statutes.		DATE	
12. Title			13.	ADDITIONS/CHANGES TO OFFIC	O	
NAME	pdt Kiefer, doanld e		1.1 TITLE 1.2 NAME		4	
STREET ADDRESS	2596 MURPHY ST NW		1.3 STREET ADDRESS		Change Addition	
CATY-ST-ZIP TITLE	ARCADIA FL VPSD	DELETE	2.1 TITLE	·	Change Addition	
NAME	KANDEFER, KENNETH F		2.2 NAME			
STREET ADDRESS CITY-ST-7.P	2262 GULF GATE DR SARASOTA FL		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			
TITLE	VDAS	DELETE	3.1 TILE		🗉 🔀 Change 🔲 Addition	
NAME STREET ADORESS	HOLEMS, DAVID 8922 CANNSTATT DR SE		3.2 NAME 3.3 STREET ADDRESS	Hornes, DAVID		
CITY-ST-ZIP	HUNTSVILLE AL		3.4. CITY - ST - ZiP			
TITLE NAME		L] DELETE	4.1 TITLE 4.2 NAME	KIEFER M. CAROL	Change XAddition	
STREET ADDRESS			4.3 STREET ADDRESS	2596 MURPHY ST. N	·w.	
CITY - ST - ZIP			4.4 CITY-ST-ZIP	ARCADIA, FL. 342		
TITLE NAME		LI DELETE	5.1 TITLE 5.2 NAME		Change L Addition	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP THTLE		DELETE	5.4 CITY - ST- ZIP	· · · · · · · · · · · · · · · · · · ·	Change	
NAME			6.1 TITLE 6.2 NAME		Change Addition	
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP 14. I do heret	by certify that the information supplie	ed with this filing does not au	64 CITY-ST-ZIP alify for the exemption s	tated in Section 119.07(3)(i), Florida Statute	s. I further certify that the	
information indicated on this particular 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 Lam 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 book 13 if changed, or on an altechment with an address.						
0.000701	TO TURE AND TYPES OF	R PHINTED NAME OF SIGNING OFFIC	ER OR DIRECTOR		Daytime Phone #	