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

May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #**1. Corporation Name 610340 (2) REAL ESTATE WITH LOVE, INC. Principal Place of Business Mailing Address 130 NE 1ST ST 130 NE 1ST ST **DELRAY BEACH FL 33444** DELRAY BEACH FL 33444 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 02/19/1979 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1958353 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KENDALL, ROBERTA LOVE 16625 MORIKAMI PARK RD 62 Street Address (P.O. Box Number is Not Acceptable) DELRAY BEACH FL 33446 83 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 Signalure, typied or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE Change NAME KENDALL, ROBERTA L. 1.2 NAME OR2E034 16825 MORIKAMI PARK RD STREET ADDRESS 1.3 STREET ADDRESS DELRAY BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE ☐ Addition 2.1 TITLE NAME KENDALL, THOMAS LEE 2.2 NAME 16625 MORIKAMI PARK RD STREET ADDRESS 2.3 STREET ADDRESS DELRAY BEACH FL CITY-ST-ZIP 2.4 CITY-ST-ZIP Change DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change ☐ Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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6.4 CITY-ST-ZIP

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 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.

SIGNATURE: ROBERTA LOVE KENDALL Roberts Fore Kendall

FILED