## 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

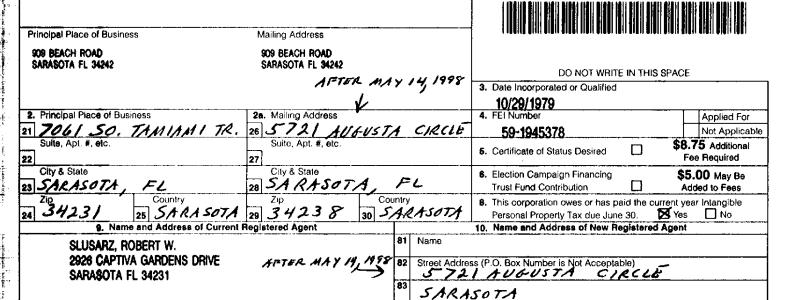
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(9)

SLUSARZ REALTY & MANAGEMENT, INC.

FILED
May 12 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. 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.

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or puritied name of registered agent and late if applicable (NOTE Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	☐ Change	Addition
NAME	<b>S</b> LUSARZ, ROBERT W		1.2 NAME		
STREET ADDRESS	2926 CAPTIVA GARDENS DRIVE		1.3 STREET ADDRESS	5721 AUGUSTA CIRCUE	
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP	SALASOTA, PL 34238	
TITLE	8	☐ DELETE	2.1 TITLE	☐ Change	Addition
NAME	SLUSARZ, ROBERT W		2.2 NAME		1
STREET ADDRESS	2926 CAPTIVA GARDENS DRIVE		2.3 STREET ADDRESS	SARASOTA, FL 34238	İ
CITY-ST-ZIP	<b>S</b> ARASOTA FL		2. 4 CITY-ST-ZIP	SARASOTA, FL 34238	İ
TITLE	VT	DELETE	3.1 TITLE	☐ Change	Addition
NAME	<b>S</b> LUSARZ, ROBERT W.		3.2 NAME		
STREET ADDRESS	2926 CAPTIVA GARDENS DRIVE		3.3 STREET ADDRESS	SARASOTA, FL 34238	
CITY-ST-ZIP	<b>SARASOTA FL</b>		3.4. CITY - ST - ZIP	SARASOTA, FL 34238	
TITLE		☐ DELETE	4.1 TITLE	Change	Addition
NAME			4. 2 NAME		Ì
STREET ADDRESS			4.3 STREET ADDRESS		i
CITY-ST-ZIP			4 4 CITY - S1 - ZIP		
TITLE		☐ DELETE	51 TITLE	☐ Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP	<u>                                     </u>	
TITLE		☐ DELETE	6.1 TITLE	☐ Change	Addition
NAME			6.2 NAME		
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 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.

\*\*PRESIDENT\* | SEC | TREAS\*\*

NONATURE OLAMBE

RARENT W. SIL

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QNI-917-0127

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