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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # 648301 A LAKES REALTY, INC.	(0)			
Principal Place of Business 1250 PROVIDENCE BLVD DELTONA FL 32725		Mailing Address 1250 PROVIDENCE BLYD DELTONA FL 32725-7300	ı	CONTRACTOR OF THE CONTRACTOR O	ALON AIĐI BIĐI BIĐI ĐIĐI ĐIĐI ĐƯỢC
				3. Date Incorporated or Qualified	3a. Date of Last Report
9 Diling a see be	ace of Business	2a. Mailing Address		12/14/1979 4. FEI Number	02/05/1996
21	CROST CA. TANDOLINASA	26		59-1957872	Applied For Not Applicable
Suite Apt	#, etc	Suite Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional
22		27 Ch. 6 Chair			Fee Required
O-ty & State 23	,	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
2η) 24	Country [25]	7ip	Country	8. This corporation has liability for	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
	r, Mildred		81 Name		
1250 PROVIDENCE BLVD			82 Street Addr	ess (P.O. Box Number is Not Acceptat	ole)
DEL	TONA FL 32725		83		
			84 City		lee Zo Code
			64 City		FL 85 Zip Code
office or n	eg stered agent or both, in the State c in familiar with and accept the obligat	f Horida. Such change was ions of, Section 607,0505, F	authorized by the corporat lorida Statutes.	oration submits this statement for the poor's board of directors. I hereby acception	pt the appointment as registered
12.	Enginezio Espector per hiori an el ofin generol ageni OFFICERS AND		11 E. Registered Agent signature requirements.	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12
TIBLE	PD	DETETE	11 TITLE		☐ Change ☐ Addition
V/As	PIPER, MILDRED A.		1.2 NAME		
STREET ADDRESS.	1250 PROVIDENCE BLVD		1.3 STREET ADDRESS		
CUY ST ZIP THE	DELTONA FL	DELETE	1.4 CITY - ST - ZIP 2.1 TITUE		Change Addition
NAME		<u></u>	22 NAME		Change C Hounton
STREET ADORESS			2.3 STREET ADDRESS		
01'y -\$1 77"			2 4 CITY - S1 - 71P		
Telef		☐ DELETE	3.1 TOLF		Change Addition
NAME			32 NAME		ļ
STREET ADDRESS.			3 3 STREET ADDRESS		
Cdy-St Zii: Tille	l	DELFTE	3.4 CITY-ST-ZIP		Change Addition
NAME			4. 2 NAME		
Street LALCORES			4.3 STREET ADDRESS		
Ony 51 20			4.4 CITY - \$1 - ZIF		
THE		DELETE	5.1 TITLE		Change Addition
HAM			5.2 NAME		
STREET ADDRESS.			5.3 STREET ADDRESS		,
CHY-SLZE THE		DELETE	5.4 City - ST- ZIP 6.1 TITLE	,	Change Addition
NAME.		many with the	6.2 NAME		
STREET ADDITION			63 STREET ADDRESS		
ČH v S! ZiP	1		64 CHTY-ST-ZIP		
14. I do herel informatio	by certify that the information shoulded in indicated on this annual poor For su	with this filing does not que applemental annual report is	lify for the exemption stated true and accurate and that	d in Section 119.07(3)(i), Florida Statute my signature shall have the same leg-	s. I further certify that the all effect as if made under oath; that

Mar 24 1997 8:00am Secretary of State

FILED