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

DOCUMENT # 658398

(3)

CENTURY 21 COLLINS REALTY, INC.

FILED									
May 02 1997 8:00am									
Secretary of State									

Principal Place of Business 80 EAST GULF BEACH DRIVE 8T GEORGE ISLAND FL 32328 US		Mailing Address	Mailing Address 60 EAST GULF BEACH DRIVE ST GEORGE ISLAND FL 32328-2808			4 109110 DIGEL BINEL FRIDE CIFIE LEIDL II		IBIL BIBIL BI	
UO		00				3. Date incorporated or Qualified 03/07/1980		e of Last	
2. Principal P	lace of Business	2a. Mailing Add	ress			, 4. FEI Nuniber			applied For
21		26	26			59-2077419 Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
22		27				3. Certificate of Status Desired		Fee F	Required
City & State	e	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	<u>├</u>			8. This corporation has liability for			s. 199.032,
24	25	[29]	3	0		1	Yes [
	9. Name and Address of Curre	nt Hegistered Agent		81	Name	10. Name and Address of New R	egisterea A	gent	
	LLINS, ALICE D.			01	Marile				
	EAST GULF BEACH DRIVE			82	Street Add	dress (P.O. Box Number is Not Accepta	ble)		
ST	GEÖRGE ISLAND FL 32328			00					
				83					
				84	City			85 Zir	Code
<u> </u>					L	- Company of the second of the	FL_	<u> </u>	
office or r agent. I a SIGNATURE						rporation submits this statement for the ation's board of directors. I horeby account to the statement of th	ept the appo	intment a	s registered
12.	Signature, typed or printed name of registered as	ND DIRECTORS	(NOTE: I	13.	ani signature requ	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12
TITLE	DP		ELF1E	1.1 TITLE		NODITIONO/OTATIONEO TO OTATI		Change	
NAME	COLLINS, ALICE			1.2 NAME			,		
STREET ADDRESS	60 EAST GULF BEACH DR				ADDRESS				
	ST GEORGE ISLAND FL			1.4 CHY- S					
CITY-ST-ZIP TITLE	ST GEORGE ISLAND FL	По	ELETE	2 1 TIFLE	31.71			Change	Addition
NAME		L		2.2 NAME					
STREET ADDRESS				2.3 STREET	ADDRESS				
-	-			2.4 CITY-					
CITY-ST-ZIP TITLE			ELETE	3.1 TOLE	21.11			Change	Addition
NAME				3.2 NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				3.4. CITY-					
TITLE	"-		ELETE	41 11TLE	01-211			Change	Addition
NAME				4 2 NAME				_ 8	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				4.4 CHY-5					
TITLE			FLETE	5.1 TITLE	21 411			Change	Addition
NAME		ے	•	5,2 NAME				_ •	
STREET ADDRESS					1 ADDRESS				
				5.4 CITY - 1	ì				
CITY-ST-ZIP TITLE			ELETE	61 TITLE	31.711			Change	Addition
NAME			·-· -	6 2 NAME					
					ADVELCC				
STREET ADDRESS				1	1 ADORESS				
CITY-ST-ZIP	bu antifu that the information arms	ind with this filing doos	not gualifu	for the eve		ed in Section 119 07/3Vi). Florida Statul	loc I further	contify to	at the

14. I do hereby certify that the information supplied with this filling 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 chapter or en an attachment with an address.

OLONIATUDE:

lice D. Collins 4/25/97 904.927-310