

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

FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 695749 (2)

1. Corporation Name
PLYMOUTH REALTY, INC.



Principal Place of Business

403 GATEHOUSE CT.
MARCO ISLAND FL 33937

Mailing Address

403 GATEHOUSE CT.
MARCO ISLAND FL 33937

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification

07/23/1981

FEI Number

59-2107216

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 3185 Horseshoe Dr. S.

Suite, Apt. #, etc.

22 First Floor

City & State

23 Naples, FL

Zip

24 34104

Country

25 USA

2a. Mailing Address

26 3185 Horseshoe Dr. S.

Suite, Apt. #, etc.

27 First Floor

City & State

28 Naples, FL

Zip

29 34104

Country

30 USA

9. Name and Address of Current Registered Agent

SNYDER, WILLIAM F.
277 N. COLLIER BLVD
MARCO ISLAND FL 33937

10. Name and Address of New Registered Agent

81 Name

A. Jack Solomon

82 Street Address (P.O. Box Number is Not Acceptable)

3185 Horseshoe Drive South

83

First Floor

84 City

Naples,

FL

85 Zip Code

34145

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

Signature of person authorized to register agent and fee (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
STPV	SNYDER, WILLIAM F	277 N. COLLIER BLVD	MARCO ISLAND FL 33937	<input checked="" type="checkbox"/>
D	SNYDER, WILLIAM F	277 N. COLLIER BLVD	MARCO ISLAND FL 33937	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
DP	SOLOMON, A. Jack	3185 Horseshoe Drive South	Naples, FL 34104	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VP	TAYLOR, Mark S.	3185 Horseshoe Drive South	Naples, FL 34104	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ST	WELKS, Karen E.	3185 Horseshoe Drive South	Naples, FL 34104	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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.

CR2E034 (10/97)