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Mar 06, 1999 8:00 am
Secretary of State

03-06-1999 90060 049 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F04525

1. Corporation Name

QUEEN REALTY, INC.

Principal Place of Business

**2915 SR 590
STE 21
CLEARWATER FL 33759
US**

Mailing Address

**2915 SR 590
STE 21
CLEARWATER FL 33759
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/06/1980

4. FEI Number

59-2042158

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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

QUEEN, GARY F

2915 SR 590, SUITE #21

2915 SR 590

CLEARWATER FL 33759

81 Name

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

83

84 City

FL

85 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PST** ☐ DELETE

NAME **QUEEN JR, FRENCH W**

STREET ADDRESS **2915 SR 590, STE 21**

CITY-ST-ZIP **CLEARWATER, FL 33759**

TITLE **D** ☐ DELETE

NAME **QUEEN JR, FRENCH W**

STREET ADDRESS **2915 SR 590, STE 21**

CITY-ST-ZIP **CLEARWATER, FL 33759**

TITLE **VD** ☐ DELETE

NAME **QUEEN, GARY F**

STREET ADDRESS **2915 SR 590, STE 21**

CITY-ST-ZIP **CLEARWATER FL 33759**

TITLE **VD** ☐ DELETE

NAME **QUEEN, LAWRENCE**

STREET ADDRESS **2915 SR 590, STE 21**

CITY-ST-ZIP **CLEARWATER FL 33759**

TITLE **VD** ☐ DELETE

NAME **QUEEN, FLORENCE M**

STREET ADDRESS **2915 SR 590, STE 21**

CITY-ST-ZIP **CLEARWATER FL 33759**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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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, with all other like empowered.

(727) 796-7123

SIGNATURE:

French W. Queen, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

French W. Queen, Jr., President 2/15/99

Date

Daytime Phone #

CR2E034 (11/98)