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 # F42369

(1)

GRANNY WEBB REALTY COMPANY, INC.

FILED
Jan 16 1997 8:00am
Secretary of State



Principal Place 105 S. NARCIS STE. 802 WEST PALM BI 2. Principal Pl 21 Surte, Apt. 22 City & State 23 Zip	SUS AVE. EACH FL 33401 ace of Business #, etc	105 S. N/ SUITE 603 WEST PAI US 2a. Mailin 26 Suite.	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28			3. Date Incorporated or Qualified 08/26/1981 4. FEI Number 59-2122657 S. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. Date of Last Report 01/30/1996 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,					
24	25	29	29 30				Florida Statutes Yes No				
, ,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9. Name and Address of Cui	rrent Registered	Agent				10.	Name and Address of New	Registered	Agent	
1649 WES	IWENCKE, KERRY R 5 PALM BEACH LAKES BLVD ST PALM BEACH FL 33401 To the provisions of Sections 607.	0502 and 607 150	8, Florida Statu	utes, the ab	82 83 84	City	poratio	P.O. Box Number is Not Accept	FL e purpose o	f changing i	Code ts registered
office or n agent I a SIGNATURE	egistered agent, or both, in the S m familiar with, and accept the ol Signature was 3 or protect name of registers	oligations of, Section	on 607.0505, F	lorida Stati	ites	the corpora		,	DATE	contment as	registered
12.		AND DIRECTORS		13.				ADDITIONS/CHANGES TO OF		DIRECTOR	RS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THOMAS, SUSAN SILVA 105 S NARCISSUS AVE SE W. PALM BEACH FL	802	DELETE DELETE	1.4 CI	ME REET 'Y-S'	ADDRESS 1 - ZIP	w1881-5-7-1-1-2-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P			Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				2 4 Cf	ME REET TY-S	ADDRESS ST-ZIP					
TITLE NAME STREET ADDRESS CITY-SI-ZIP			DELETE	3.1 TIT 3.2 NA 3.3 ST 3.4. CI	ME Reet	ADDRESS ST-ZIP				∟ Change	Addition
TITLE NAME STREET ADDRESS DITY-SI-ZIP			DELETE	4.1 TIT 4.2 N/ 4.3 ST 4.4 CIT	ame Reet	AODRESS 1-21P				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	5.1 TII 5.2 NA	ile Me Reet	ADORESS				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY: ST-ZIP			DELETE	6.1 T(I 6.2 NA	L€ ME REET	ADDRESS				Change	Addition

14. I do 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 supplier its 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 to stee 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 op an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE

PRES IDENT

1-7-9

561-659-555