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 # F59477

(2)

BLC REALTY, INC.

FILED Apr 21 1997 8:00am Secretary of State



Principal Place 4521 PARKER I WEST PALM BI US		Mailing Address 4521 PARKER AVE. WEST PALM BEACH FL 33405-2801 US		Date Incorporated or Qualified			
[12/23/1981	04/04/19	196
	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-2459540		Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 7	.75 Additional ee Required
Crty & State		City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be
Zip	Country	Zip	Coun	try	8. This corporation has liability for in	ntangible tax un	der s. 199.032,
24	25	29	30			Yes 🔀 No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re-	pistered Agent	
BRO	IWN, THOMAS G		[4	Name			
324 DATURA STREET WEST PALM BEACH FL 33401			ļī	32 Street Add	ddress (P.O. Box Number is Not Acceptable)		
WEG	OF PALM DEMON PL 30401		1	13			B
			וֹ	14 City	The state of the s	FL 85	Zip Code
office or n agent if an SIGNATURE	egistered agent, or both, in the State of rri familiar with, and accept the obligat	of Florida. Such change was ions of, Section 607.0505, Fi	authorized orida Statu	by the corpora tes.	poration submits this statement for the p tion's board of directors. I hereby accep ared when reinstating)	t the appointme	nt as registered
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		
1111.6	DP	☐ DELETE	1.1 7171	E	DP	∠X Ch	ange L Addition
NAME	HORNER, ROBERT R JR		1 2 NA	1E	Horner, Robert R. J.	r •	
STREET ADDRESS	441 N COUNTRY CLUB DRIVE		1.3 STR	EET ADDRESS	4521 Parker Ave.		
City-St-ZiP	ATLANTIS FL	No. car		(-ST-ZIP	West Palm Beach, FL	33405	and I Taken
TITLE	dst Horner, Stephanie B.	DELETE	21 111	1		□ Ch	ange L. Addition
NAMÉ	441 N. COUNTRY CLUB DRIVE		2.2 NAM				
STREET ADDRESS	ATLANTIS FL		1	EET ADDRESS			
CITY: S1-ZIP TITLE	AIGHTIN I C	DELETÉ	2 4 CIT	Y-ST-ZIP		L ch	ange Addition
NAME		C PARTIE	3.2 NAM	" }		VI	- Intoliti
NAME STREET ADDRESS			. I	EET ADDRESS			
CITY ST-ZIP				Y-ST-ZIP			
TITLE		DELETE	4.1 111			Ch	ange Addition
NAME			4. 2 NA				
STREET ADDRESS				EET ADORESS			
CITY - ST - ZIP	!		1	(-ST-ZIP			
TILLE		☐ DELETE	5.1 TiTL			☐ Cn	ange Addition
NAME			5.2 NAM	AE)			
STREET ADDRESS	1			EET ADDRESS			
CHTY - ST - 7/P	l			r-ST-ZIP			
TOTLE		☐ DELETE	6.1 1(1)			☐ Ch	ange Addition
NAME	<u> </u> 		62 NA	AE			
STREET ADDRESS			6.3 STR	EET ADDRESS			
CITY-SI-ZiP			6.4 CIT	r-ST-ZiP			

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-97 \$6/-655-5900 Daytime Prone #