

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

FILED
Apr 28, 1999 8:00 am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1999



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

04-28-1999 90053 030 ***150.00

DOCUMENT # F92000000919

1. Corporation Name
ROOT REAL ESTATE CORP.

Principal Place of Business

Mailing Address

525 FENTRESS BLVD
 DAYTONA BEACH FL 32114
 US

P.O. BOX 2860
 DAYTONA BEACH FL 32120-2860



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/21/1992

4. FEI Number

59-3151515

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

VOGES, WILLIAM J
 525 FENTRESS BLVD.
 DAYTONA BEACH FL 32114

10. Name and Address of New Registered Agent

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

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | DELETE |
|-------|----------------------|--------------------|------------------------|-------------------------------------|
| PD | VOGES, WILLIAM J | 525 FENTRESS BLVD. | DAYTONA BEACH FL 32114 | <input type="checkbox"/> |
| V | MARONEY, PHILIP | 525 FENTRESS BLVD | DAYTONA BEACH FL 32114 | <input type="checkbox"/> |
| T | DITTBENNER, EILEEN M | 525 FENTRESS BLVD. | DAYTONA BEACH FL 32114 | <input type="checkbox"/> |
| V | NOWWISKIE, RONALD | 525 FENTRESS BLVD | DAYTONA BEACH FL 32114 | <input type="checkbox"/> |
| D | ROOT, CHAPMAN J II | 525 FENTRESS BLVD. | DAYTONA BEACH FL 32114 | <input checked="" type="checkbox"/> |
| S | ROMANO, SHARON | 525 FENTRESS BLVD | DAYTONA BCH FL 32114 | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY-ST-ZIP | Change | Addition |
|-----------|------------------|--------------------|-------------------------|--------------------------|-------------------------------------|
| AS | JONES, VICKY | 525 FENTRESS BLVD. | DAYTONA BEACH, FL 32114 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| D | ROOT, JOHN S. | 525 FENTRESS BLVD. | DAYTONA BEACH, FL 32114 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| D | ROOT, WILLIAM S. | 525 FENTRESS BLVD. | DAYTONA BEACH, FL 32114 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4.1 TITLE | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY-ST-ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.1 TITLE | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY-ST-ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.1 TITLE | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 CITY-ST-ZIP | <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, with all other like empowered

SIGNATURE:

[Signature]
 WILLIAM J. VOGES, PRESIDENT

Date

(904) 258-4744

Daytime Phone #

CR2E034 (1/198)