

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

FILED
Jan 21 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 # F93000005391 (8)

1. Corporation Name
REALTY ONE, INC.



Principal Place of Business: **13129 N 19TH STREET TAMPA FL 33612 US**

Mailing Address: **2519 MCMULLEN BOOTH RD. STE. 510-228 CLEARWATER FL 34621 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/29/1993	
21	26	4. FEI Number 52-1770892		Applied For Not Applicable	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip	30. Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
NOEL, JERRY 2519 MCMULLEN BOOTH RD STE 510-228 CLEARWATER FL 34621				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 officer, its 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: *Jerry Noel* DATE: **1-5-98**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	POST	<input type="checkbox"/> DELETE	11. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	NOEL, JERRY		12. NAME				
STREET ADDRESS	2519 MCMULLEN BOOTH RD.		13. STREET ADDRESS				
CITY - ST - ZIP	CLEARWATER FL		14. CITY - ST - ZIP				
TITLE	V	<input type="checkbox"/> DELETE	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	POE JR, WILLIAM L		22. NAME				
STREET ADDRESS	5525 TWIN KNOLLS RD, STE 328		23. STREET ADDRESS				
CITY - ST - ZIP	COLUMBIA MD		24. CITY - ST - ZIP				
TITLE		<input type="checkbox"/> DELETE	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME			32. NAME				
STREET ADDRESS			33. STREET ADDRESS				
CITY - ST - ZIP			34. CITY - ST - ZIP				
TITLE		<input type="checkbox"/> DELETE	41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME			42. NAME				
STREET ADDRESS			43. STREET ADDRESS				
CITY - ST - ZIP			44. CITY - ST - ZIP				
TITLE		<input type="checkbox"/> DELETE	51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME			52. NAME				
STREET ADDRESS			53. STREET ADDRESS				
CITY - ST - ZIP			54. CITY - ST - ZIP				
TITLE		<input type="checkbox"/> DELETE	61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME			62. NAME				
STREET ADDRESS			63. STREET ADDRESS				
CITY - ST - ZIP			64. CITY - ST - ZIP				

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.

SIGNATURE: *Jerry Noel* DATE: **1/5/98** TIME: **7:49:05 PM**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)