SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

**199**8



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** F97000001665 (5)

INSIGNIA RELATED, INC.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Principal Place of Business Mailing Address 1 INSIGNIA PLAZA PO BOX 1089 75 BEATTIE PL **GREENVILLE SC 29601** GREENVILLE SC 29802 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/02/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 APPLIED FOR 56-2020562 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year intengible Personal Property Tax due June 30. Yes No 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City 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, typod or printed name of registered egent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE CR2E034 (5/98) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE DELETE Change JARRARD, WILLIAM H JR NAME 1.2 NAME 1 INSIGNIA PLAZA, 75 BEATTIE PL STREET ADDRESS 1.3 STREET ADDRESS GREENVILLE SC 29602 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE Change Addition NAME TIN**es, John** K 2.2 NAME PANIEL LEBEY 1 INSIGNIA PLAZA, 75 BEATTIE PL STREET ADDRESS 2.3 STREET ADDRESS GREENVILLE SC 29602 CITY-ST-Z#P 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition URETTA, RONALD NAME 3.2 NAME STREET ADDRESS 1 INSIGNIA PLAZA, 75 BEATTIE PL 3.3 STREET ADDRESS GREENVILLE SC 29602 CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE [] Change Addition NAME BUBCHLER, KELLEY M 4.2 NAME 1 INSIGNIA PLAZA, 75 BEATTIE PL STREET ADDRESS 4.3 STREET ADDRESS GREENVILLE SC 29602 CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

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 an officer or director of the contraction or the receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an orders.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

DELETE

DELETE

**FILED** Jul 24 1998 8:00am Secretary of State



Change Addition

0000025992**4**0 -07/27/98--01054--023

-11,198

\*\*\*150.00



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One Insignia Financiai. Plaza • P.O. Box 1089 Greenville, South Carolina 29602 (864) 239-1000

July 9, 1998

Ms. Sandra Mortham Secretary of State Annual Reports Filings Division of Corporations P. O. Box 1500 Tallahassee, FL 32302-1500

Dear Ms. Mortham:

Last July 7, 1998, I received the 1998 Profit Corporation Annual Report packets for 32 entities controlled by Insignia Financial Group, Inc. Each form indicated that it was a second notice and as such imposed a \$400 penalty.

Please be informed that I did not receive the first notice for these entities. The parent company. Insignia Financial Group, Inc. has over two hundred entities that comprise its corporate structure. Each of these entities has multi-state filing requirements. Due to the complexities of our corporate structure, the receipt of the appropriate forms issued by the state governments mostly prompts compliance with these filing requirements. I had no intention of ignoring such requirements.

In view of this, I respectfully request abatement from the penalty. I assure you that efforts will be made to better monitor receipt of these forms. Please find attached a copy of the completed Annual Report for \_\_\_\_\_\_\_ and a check for \$150.00 representing its annual fee.

Thank you for your kind attention.

Very truly yours.

Anthony J. DeCredico

Budget & Tax Director