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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700006060 (4)

WINDOLPH REALTY CO., INC.

FILED Apr 09 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address	11	- I IRBINOS INIO IBIAI (ABI) OBINI BBINI GOLIN BBINI BB	110 Mills doile dilit east (ant
57 WHITE OAK CIRCLE 57 WHITE OAK CIRCLE ST CHARLES IL 60174 ST CHARLES IL 60174					
oi Chiances	IL OUT 14	ST CHARLES IL 60174		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
9 Principal D	Place of Business	On Mailing Address		11/17/1997	
21	race or business	2a. Mailing Address		4. FEI Number 14-77980	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
23	<del></del>	28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the Ct	ırrent year Intangible X Yes □ No
[24]	g, Name and Address of Currer		301	Personal Property Tax due June 30.  10. Name and Address of New Registered	
STRAWN, JOEL T 81 Name				17187 \ - 1414 + 1414	
SA NE ATH AVENUE				ress (P.O. Box Number is Not Acceptable)	
DELRAY BEACH FL 33483			82 Street Add	ress (F.O. Box Number is Not Acceptable)	
			83	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
j			84 City		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 age	ent and title d applicable (NOTE	Registered Agent signature requi	red when reinstating) DATE	· · · · · · · · · · · · · · · · · · ·
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PCD	DELETE	1.1 TITLE		Change Addition
NAME	BROEK, HOWARD W		1.2 NAME		
STREET ADDRESS	57 WHITE OAK CIRCLE ST CHARLES IL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VD VINANLES IL	DELETE	1.4 CITY-ST-ZIP		0
NAME	GENTILE, GILLIAN	☐ Dereie	2.1 TITLE 2.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	57 WHITE OAK CIRCLE		2.3 STREET ADORESS	•	
CITY-ST-ZIP	ST CHARLES IL		2.4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SCHNELL, JENNIFER		3.2 NAME		
STREET ADDRESS	57 WHITE OAK CIRCLE		3.3 STREET ADDRESS		
CITY-ST-ZIP	ST CHARLES IL		3.4. CITY-ST-ZIP		
TITLE	VD Stempel, Catherine	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	57 WHITE OAK CIRCLE		4. 2 NAME		
STREET ADDRESS	ST CHARLES IL		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 City-St-ZiP 5.1 Title		☐ Change ☐ Addition
NAME			5.2 NAME		- comigo [-] (Maritin)
STREET ADDRESS			5.3 STREET ADDRESS	•	,
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	perify that the information equalized u	interest for	6.4 CITY-ST-ZIP	Postino 140 07/2Vi). Elecido Chabutas I funtas a	

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 co-poration or the required properties of 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 co-poration or the required properties of accurate the properties of the co-poration or the required properties.

SIGNATURE:

3/31/98

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