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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jul 03 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G13373 (7) 1. Corporation Name GERACI REALTY, INC.				
Principal Place of Business 2023 W 1ST STREET FORT MYERS FL 33901 US		Mailing Address 2023 W. 1ST STREET FORT MYERS FL 33901-3110 US		4   DETIFE \$983   1808   GISER ELIEF (COUR THE BEST)   BISH   BISH   GISH   GISH   1861
US		00		3. Date Incorporated or Qualified
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
21		26		59-2259701 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Certificate of Status Desired     \$8.75 Additional
22		27		Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
<b>23</b> Zip	Country	28	Country	Trust Fund Contribution Added to Fees
24 21p	25	<b>├</b> ŋ `	oodniry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
24	9. Name and Address of Curren		1	10. Name and Address of New Registered Agent
GERACI, DONALD D 2021 W. 1ST ST. FORT MYERS FL 33901  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the			83 84 City	FL 85 Zip Code
office or registered agont, 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 obligators of, Section 607,0505, Florida Statutes.  SIGNATURE				
12.	Signature, typod or printed name of registered ago: OFFICERS AND		Rogistered Agent signature	required when remarkshing)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSDC OFFICERS AND	DELETE	1.1 TIPLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	GERACI, DONALD D		1.2 NAME	
STREET ADORESS	12780 AUBREY LN.		13 STREET ADDRESS	1362 Bromon Ave.
CITY-ST-ZIP	BOKEELIA FL 33922		1.4 CITY - ST - ZIP	1362 Bromon Ave. FJ. My ovs, FL 33901
TITLE		☐ DELETE	21 TIILE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY-S1-7IP	
TITLE		☐ DELETE	3.1 TITLF	Change Addition
NAME			3.2 NAME	
STREET ADORESS			3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	<u></u>	☐ DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	Change Addition
NAME		bleen	4.2 NAME	Change C Addition
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-SI-ZIP	
TITLE		DELETE	51 TITLE	Change Addition
NAMÉ			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addilion
NAME			6.2 NAME	
STREET ADORESS			6.3 STREET ADDRESS	
CITY-ST-ZIP	_		6.4 CITY-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 comporation 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 of changed, or on an attachment with an address.