

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Apr 15, 1999 8:00 am  
Secretary of State

04-15-1999 90046 048 \*\*\*150.00

DOCUMENT # G40529

1. Corporation Name

BLUE RUN REALTY, INC.

Principal Place of Business

20460 E. PENNSYLVANIA AVE.  
DUNNELLO FL 34432  
US

Mailing Address

20460 E. PENNSYLVANIA AVE.  
DUNNELLO FL 34432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/23/1983

4. FEI Number

59-2305976

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 20709 W. PENNSYLVANIA AVE

26 20709 W. PENNSYLVANIA AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 DUNNELLO FL

27

City & State

City & State

23 34431 USA

28 DUNNELLO, FL

Zip Country

Zip Country

24 25 29 34431 30 USA

9. Name and Address of Current Registered Agent

WINKLER, LARRY W.  
19700 MUSTANG DRIVE  
DUNNELLO FL 34432

10. Name and Address of New Registered Agent

81 Name

ANITA L. HORAN

82 Street Address (P.O. Box Number is Not Acceptable)

7215 W. RIVERBEND RD.

83

84 City

DUNNELLO

FL

85 Zip Code

34433

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

Anita L. Horan

ANITA L. HORAN

DATE

4/9/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE PVT ☒ DELETE

NAME WINKLER, PATRICIA A.  
STREET ADDRESS 20460 E. PENNSYLVANIA AVENUE  
CITY-ST-ZIP DUNNELLO, FL 00000

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
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TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ~~PRESIDENT~~ PVT ☒ Change ☐ Addition

1.2 NAME FRANCIS W. HORAN

1.3 STREET ADDRESS 20709 W. PENNSYLVANIA AVE

1.4 CITY-ST-ZIP DUNNELLO, FL 34431 ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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, with all other like empowered.

SIGNATURE:

Francis W. Horan

Francis W. Horan 4/9/99

352-489-1742

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)