## **☞ 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

## DOCUMENT # G44765 1. Corporation Name

MCARTHUR REALTY, INC.

·	
Principal Place of Business	Mailing Address
2201 E OCEAN OAKS LANE VERO BCH FL 32963 US	PO BOX 3426 VERO BEACH FL 32964

## **FILED** Jan 21, 1999 8:00am **Secretary of State** 01-21-1999 90066 008 \*\*\*150.00

Principal Plac	ce of Business	Mailing Address			* 1001111 0011 01011 10010 01101 0111 0111		
2201 E OCEAN		PO BOX 3426 VERO BEACH FL 32964					
US					DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualifed 06/22/1983		
2. Principal l	Place of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21		26			59-2290510	No	t Applicable
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.		•	5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	ate	City & State			6. Election Campaign Financing	\$5.00	May Be
23	•	28			Trust Fund Contribution	Added to	o Fees
Zip 24	Country 25	Zip	Co.	untry	This corporation owes the current year     Personal Property Tax.	Intangible	□No
24	9. Name and Address of Curren	<u> </u>	130	<del>                                     </del>	10. Name and Address of New Registere		
	5. Name and Address Ordaner			81 Name			
	RK, JAMES D.			82 Street Add	dress (P.O. Box Number is Not Acceptable)		
	5 TARPON LÂNE	-			1		and the server
	-302			83	1. 19 4. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	剪编机
VEH	RO BCH FL 32960			84 City		. 85 Zip C	ode
				GT City	F		,000
SIGNATURE	Signature, typed or printed name of registered agen OFFICERS AN		E: Registered		ired when reinstating)	AND DIRECTO	RS IN 12
TITLE	PD	DELETE	1,1 TI		14.020 F ST 2	Change	Addition
NAME	DAVIS, NANCY JEAN		1.2 N				_
STREET ADDRESS	APA OF APTH DD. #0000			TREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			ITY-ST-ZIP			
TITLE	VST	DELETE	_	11 1 - 3 + - 2 IF	,		
NAME	YORK, JAMES DENNIS		2.1 TI	ITLE	,	☐ Change	☐ Addition
STREET ADDRESS	ADDE TARRONNI LANE IL DOG	☐ DELETE	2.1 TI			Change	☐ Addition
		□ pereie	2.2 N	AME	,	☐ Change	☐ Addition
CITY-ST-ZIP		☐ pereie	2.2 N/ 2.3 ST	AME TREET ADDRESS	,	☐ Change	☐ Addition
NAME OF STATE	VERO BCH FL	DELETE	2.2 N/ 2.3 ST	TREET ADDRESS	,	☐ Change	Addition
			2.2 N/ 2.3 ST 2.4 C	AME TREET ADDRESS CITY-ST-ZIP ITLE			
STREET ADDRESS	VERO BCH FL		2.2 N/ 2.3 ST 2. 4 C 3.1 TI 3.2 N/	AME TREET ADDRESS CITY-ST-ZIP ITLE AME			
STREET ADDRESS	VERO BCH FL. T. V. J. T. Z. S. C. S.		2.2 N/ 2.3 S <sup>2</sup> 2.4 C 3.1 TI 3.2 N/ 3.3 S <sup>3</sup>	TREET ADDRESS CITY-ST-ZIP ITLE AME TREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	VERO BCH FL		2.2 N/ 2.3 S <sup>2</sup> 2.4 C 3.1 TI 3.2 N/ 3.3 S <sup>3</sup>	AME TREET ADDRESS CITY-ST-ZIP ITLE TREET ADDRESS CITY-ST-ZIP			Addition
CITY-ST-ZIP ACT	VERO BCH FL	☐ OELETE	2.2 NJ 2.3 ST 2.4 C 3.1 TI 3.2 NJ 3.3 ST 3.4. C	AME TREET ADDRESS DITY-ST-ZIP TILE AME TREET ADDRESS DITY-ST-ZIP SITLE		Change	Addition
CITY-ST-ZIP ACTOR	VERO BCH FL	☐ DELETE	2.2 NJ 2.3 ST 2.4 C 3.1 TI 3.2 NJ 3.3 ST 3.4. C 4.1 TI 4.2 NJ	AME TREET ADDRESS DITY-ST-ZIP TREET ADDRESS LITY-ST-ZIP TITLE TREET ADDRESS LITY-ST-ZIP TITLE TAME		Change	Addition
CITY-ST-ZIP AT TITLE NAME STREET ADDRESS	VERO BCH FL	☐ OELETE	22 Nv 23 Si 2.4 C 3.1 Ti 32 Nv 33 Si 3.4. C 4.1 Ti 4.2 N 4.3 Si	AME TREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS TREET ADDRESS TREET ADDRESS		Change	Addition
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CITY-ST-ZIP AND TITLE  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	VERO BCH FL. To a part of the second	DELETE  DELETE  DELETE	22 N/ 23 ST 2.4 C 3.1 TI 3.2 N/ 3.3 ST 3.4. C 4.1 TF 4.2 N/ 4.3 ST 4.4 CI 5.1 TI 5.2 N/ 5.3 ST 5.4 CI	AME TREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS TREET ADDRESS TREET ADDRESS TITY-ST-ZIP TITLE TREET ADDRESS TITY-ST-ZIP TITLE TREET ADDRESS TREET ADDRESS TITY-ST-ZIP TITLE TREET ADDRESS		Change	Addition
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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: