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

Mailing Address

C/O ROBERT S. SUTTE

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90209 050 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G48764 1. Corporation Name

Principal Place of Business

C/O ROBERT S. SUTTE

SIGNATURE:

REAL PROPERTY ANALYSTS, INC. OF ORLANDO

2433 LEE ROAD WINTER PARK FL 32789				2433 LEE ROAD WINTER PARK FL 32789					İ	DO NOT WR	TE IN THIS	SPACE			
WINDLIN I AND I	L 32703		•••		E GET GO					Date Incorporated or Qualifed 07/13/1983					
2. Principal Place of Business				2a. Mailing Address						FEI Number			Арр	ied For	
21			26	26						59-2344450		L		Applicable	
Suite, Apt. #, etc.			<u>. C</u>	Suite, Apt. #, etc.					5	Certifcate of Status Desired				Iditional	
			27	27					<u> </u>				e Req		
City & State				City & State					6.	Election Campaign Financing		-		tay Be	
23				28					4_	Trust Fund Contribution			ded to	Fees	
Zip	`	Country	igspace	Zip Country					8.	This corporation owes the cur	rent year into			741.	
24	25		29							Personal Property Tax.	O!-4	☐ Yes		<u> </u>	
	9. Name and	Regi	gistered Agent 81 Name				Name	10. Name and Address of New Registered Agent							
CHIT	TE DODEDT 9					81	ļ	Name							
SUTTE, ROBERT S.				ľ			T	Street Address (P.O. Box Number is Not Acceptable)							
2433 LEE ROAD WINTER PARK FL 32789															
i retiak	IER PARK FL 3	2/09				83	l								
					•	84	t	City	-			85	Zip C	ode	
											<u> </u>	Щ.	- 11		
office or re	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											DATE				
	Signature, typed or print	ted name of registered agent					d Agent signature required v			ADDITIONS/CHANGES TO OF		D DIRE	CTOE	S IN 12	
12.		OFFICERS AND	ואוט ט		DELETE	13.		<u> </u>		ADDITIONS/CHAMGES TO OF	I ICENS AN	Cha		Addition	
TITLE	P	DT C			OLLLIL	1.2 NAME						_	-3-		
NAME.	SUTTE, ROBERT S												•	ì	
STREET ADDRESS	2433 LEE RO/						1.3 STREET ADDRESS								
CITY-ST-ZIP	WINTER PARK, FL 00000						1.4 CITY-ST-ZIP					□ Cha	ince.	Addition	
TITLE	S			. –			2.1 TITLE						gc		
NAME	SUTTE, GRACE E						2.2 NAME								
STREET ADDRESS	2433 LEE RO/						2.3 STREET ADDRESS					÷			
CITY-ST-ZIP	WINTER PARK	(, FL 00000					2.4 CITY-ST-ZIP					Cha	naa	Addition	
TITLE							3.1 TITLE		•			оп	inge		
NAME						3.2 NAME									
STREET ADDRESS				3.3 ST			3.3 STREET ADDRESS								
CITY-ST-ZIP	.,					3.4. CITY-5	ST-	ZIP				- Ch		Addition	
ΠΙLE				LJ	DELETE	4.1 TITLE						☐ Cha	inge	∭ ¥00IIIOII	
NAME	1					4.2 NAME		<u> </u>							
STREET ADDRESS						4.3 STREE	ΤA	ADDRESS							
CITY-ST-ZIP						4.4 CITY-S	T-2	ZiP							
TITLE					DELETE	5.1 TITLE						☐ Cha	ange	☐ Addition	
NAME						5.2 NAME									
STREET ADORESS						5.3 STREE	TΑ	ADDRESS			•				
CITY-ST-ZIP	}			5.4 CITY			T-7	ZIP		<u></u>					
TITLE				Q	DELETE	6.1 TITLE						Cha	ange	Addition	
NAME						6.2 NAME		1							
STREET ADDRESS				6.3 \$1			EET ADDRESS								
	I							1							

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.