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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # G76047

1. Corporation Name

HERNANDO BEACH REALTY, INC.

Principal Place	e of Business	Ma	ailing Address			1.22 . 22.0.0		
•			7 CALIENTA ST					
4317 CALIENTA ST Spring. Hill. Fl. 34607			SPRING. HILL. FL 34607			OO NOT WRITE IN THIS SPACE		
US		US	US			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		Ï
						12/27/1983		K - 4 Faa
2. Principal Place of Business 2a. Mailing Addre			Mailing Address			4. FEI Number		olied For
		26				59-2380296		Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A Fee Re	
2		27						
City & State			City & State			6. Election Campaign Financing	\$5.00	
23		28				Trust Fund Contribution	Added to	Fees
Zip	Count	try	Zip	Countr	У	8. This corporation owes the current y	ear Intangible ☐ Yes	□No
24	25	29		30		Personal Property Tax.		
	9. Name and Add	ress of Current Regis	tered Agent		•1 •1	10. Name and Address of New Regis	tereu Agent	
	, · ·	Samuel Bar		8-	Name			
WANDA EVANS				8:	2 Street Add	Address (P.O. Box Number is Not Acceptable)		
4317 CALIENTA DRIVE				L.			<u> </u>	1927 F (B) 1 4937
SPRING HILL FL 33526				8	3			
				84	4 City		85 Zip C	ode
				1	'		FL	
11 Purcuant	to the provisions of Se	ctions 607.0502 and 6	07.1508, Florida Statut	es, the abo	ve-named cor	rporation submits this statement for the purp	ose of changing its	registered
		th in the State of FIOR	na. Such channe was a	minized b	y lile culbula	tion's board of directors. I hereby accept the	appointment as reg	gistereo
🥬 agent. La	am familiar with, and ad	cept the obligations of	f, Section 607.0505, Flo	rida Statute				-
SIGNATURE	Standura based or printed par	me of registered agent and title	if applicable. (NOTE	: Registered Ag	ent signature requi	ired when reinstating)	ATE	
12.		OFFICERS AND DIRE		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
TITLE	PVTD	0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	WANDA EVANS			1.2 NAME	.			
	40000 UII LA DD			1.3 STRE	ET ADDRESS			
STREET ADDRESS	SPRINGHILL FL			1.4 CITY-				
CITY-ST-ZIP	SPRINGIBLE		☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
TITLE				2.2 NAME				
NAME					ET ADDRESS			
STREET ADDRESS	5			1	!			
CITY-ST-ZIP	<u> </u>	***************************************	☐ DELETE	2.4 CITY			Change	Addition
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NAME	A second	•		3.2 NAME				
STREET ADDRESS	<u>s</u>							
CITY-ST-ZIP					ET ADDRESS			
TITLE				3.4. C/TY	-ST-ZIP		Change	Addition
NAME	<u> </u>		☐ DELETE	3.4. C/TY 4.1 T/TLE	-ST-ZIP		☐ Change	Addition
STREET ADDRESS			☐ DELETE	3.4. C/TY	-ST-ZIP		☐ Change	Addition
	5		☐ DELETE	3.4. C/TY 4.1 T/TLE 4. 2 NAM	-ST-ZIP		☐ Change	Addition
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	5		☐ DELETE	3.4. C/TY 4.1 T/TLE 4. 2 NAM 4.3 STRE	-ST-ZIP	. , }	☐ Change	Addition
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SIGNATURE:

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.

FILED

Jan 23, 1999 8:00am

Secretary of State

01-23-1999 90040 042 ***150.00