

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

FILED
Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G86663** (3)
1. Corporation Name
PALMER REALTY ASSOCIATES, INC.



Principal Place of Business 3300 SW 34TH AVENUE, STE. 148 OCALA FL 34474 US	Mailing Address 3300 SW 34TH AVENUE, STE. 148 OCALA FL 34474 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3233 S.W. 33rd Road Suite, Apt. #, etc. 22 Suite 201 City & State 23 Ocala, Florida Zip 24 34474 Country 25 Marion		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 02/27/1984	
		4. FEI Number 59-2384487		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent PALMER, MARGARET 709 SOUTHEAST 15TH AVE. OCALA FL 34471				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D PALMER, WHITFIELD M JR	1.2 NAME	
STREET ADDRESS	3300 SW 34TH AVE. 148	1.3 STREET ADDRESS	3233 S.W. 33rd Road, Suite 201
CITY-ST-ZIP	OCALA FL	1.4 CITY-ST-ZIP	Ocala, Florida 34474
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VP BARBER, JON K	2.2 NAME	
STREET ADDRESS	3300 S.W. 34TH AVE., S-148	2.3 STREET ADDRESS	3233 S.W. 33rd Road, Suite 201
	OCALA FL	2.4 CITY-ST-ZIP	Ocala, Florida 34474
NAME	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	GLANZER, DOROTHY	3.2 NAME	
CITY-ST-ZIP	3300 SW 34TH AVE S148	3.3 STREET ADDRESS	3233 S.W. 33rd Road, Suite 201
	OCALA FL	3.4 CITY-ST-ZIP	Ocala, Florida 34474
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: **Dorothy Glanzer**

1/19/98 252 327 6145

CR2E034 (10/97)