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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # H03415

(7)

FLORIDA FIRST COAST REALTY GROUP, INC.

Principal Flade of Business 6280-3 PRINCETON SQUARE BLVD. WEST	Mailing Address 1301 RIVERPLACE BLVD #1840 JACKSONVILLE FL 32207	-9047	3. Date Incorporated or Qualifie	
			05/14/1984	05/01/1996
2. Principal Frace of Jusiness	2a. Mailing Address		4. FEI Number	Applied For
1301 KIVERPHAGE		,	59-2400031	Not Applicable
	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	
3 JAX 12	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation has liability l	or intangible tax under s. 199.032,
432201-9041 US	∠	30	Florida Statutes	Yes No
······································	rent Registered Agent	81 Name	10. Name and Address of New	Registered Agent
TYRE, WARREN A.	N 49-4	Traine		
8280-3 PRINCETON SQUARE BLVI JACKSONVILLE FL 92250	V-14-7	82 Street Add	dres, I.O. Box Number is Not Acc	1840 - # 1840
		84-370	MENERAL I AT	FI 85 50000 70
 Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta agent. Lan. familiar with, and accept the obl. 	502 and 607 1508, Florida Statu	tes, the above-named cor	poration submits this statement for th	e purpose of changing its re-
agent. Lam familian with, and accept the obl	ligations of, Section 607.0505, F	lorida Statutes	more board or directors. Thereby ac	cept the appointment as registered
SIGNATURE :				
Segar so typic or proceed mass of registered. OFFICERS A	AND DIRECTORS	Tk: Registered Agent signature requ		DATE FICERS AND DIRECTORS IN 12
TITLE COP	DELETE	1.1 TOLE	ADDITIONO, OF ANGLO TO OF	Change Addition
TYRE, WARREN A.		1.2 NAME		
STREE ADDRESS 1301 RIVERPLACE BLVD, #1	1840	1.3 STREET ADDRESS		
CHY-SI-ZIP JACKSONVILLE FL 32207		1.4 CITY-ST-ZIP		
TIRLE	DELETE	2.1 TITLE		Change Addition
NAVE		2.2 NAME		
STREET ABOR: 5%		2.3 STREET ADDRESS		
CC.Y+\$1+749	T on or	2 4 CITY - ST - ZIP		
altr	DELETE	3.1 TITLE		L Change Addition
NAM:		3.2 NAME		
STREET ABOVE SIS		3.3 STREET ADDRESS		
LATY-ST-7IP TITLE	DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
NAM!	End percit	4.2 NAME		Change Addition
STREET ADDRESS		4.3 STREET ADDRESS		
CHY-SI-ZIP		4.4 CITY-ST-ZIP		
101£	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY - ST - ZB1		5.4 CITY-ST-ZIP		•
III.F	☐ DELETE	61 TITLE	***************************************	☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDIESS		6.3 STREET ADDRESS		
CHY-ST-201	· · · · · · · · · · · · · · · · · · ·	6.4 CITY-ST-ZIP		
14. I do nere by cert by that the information supplinformation indicated on this annual report of an an officer or director of the corporation appears in Block 12 or Block 13 or changed.	hed with this filing does not qual or suppremental annual report is or the receiver or trustee empor or on an attachment with an ad	ify for the exemption state true and accurate and tha wered to execute this repo dress.	of in Section 119.07(3)(i), Florida Stat at my signature shall have the same l ort as required by Chapter 607, Florid	utes. I further certify that the egal effect as if made under oath, that a Statutes; and that my name

SIGNATURE:

THE AND TYPE OF SHIRING OFFICER OR DIRECTOR

1-14-96 904-398-5100

FILED

Mar 27 1997 8:00am

Secretary of State