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

PROFIT **CORPORATION ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H07297

(5)

SOUTHERN CROSS PROPERTIES, INC.

FILED May 07 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address			i sansari dett antis sond trace saltt tobs order didt anny didte bible nellet fett
2205 SNOWHILL RD.		2205 SNOWHILL RD.			
CHULUOTA FL 32768		CHULUOTA FL 32766	CHULUOTA FL 32766		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					06/11/1984
	ace of Business	2a. Mailing Address			4, FEI Number Applied For
Suite, Apt. #, etc		26	• • • • • • • • • • • • • • • • • • •		59-2438646 Not Applicable
Suite, Api. #, etc		Suite, Apt. #, etc.	27		5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State	4 +		Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zıţı	Countr	у	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property 1ax due June 30. Yes No
	e, Name and Address of Curi	ent Registered Agent	B1	Name	10. Name and Address of New Registered Agent
	EACHERN, PAMELA K.			1	
2205 SNOW HILL RD. CHULUOTA FL 32768			82	Street /	et Address (P.O. Box Number is Not Acceptable)
CHULUUTA PL 32/00			83	3	
'				J	
			84 City		FL B5 Zip Code
office or re agent I as	to the provisions of Sections 607.0 egistered agent or both, in the Stanfamiliar with, and accept the ob-	ate of Florida, Such change was a ligations of, Section 607.0505, Fl	authorized to orida Statute	by the corr is.	ed corporation submits this statement for the purpose of changing its registered or
12.	OFFICERS AND DIRECTORS		13.	Till a greater	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD DELETE MCEACHERN, PAMELA		1.1 TITLE		Change Addition
NAME			1.2 NAME		LUIDI MELAUTERIA
STREET ADDRESS	2205 SNOW HILL ROAD		1.3 STREET ADDR		2285 Sivon Hill LOAD
CITY-ST-ZIP	CHULUOTA FL	C DEFEAT	1.4 CITY	ST-ZIP	CAVIVOTA PI 32 60
TITLE		☐ DELETE	2 1 TITLE 2 2 NAME		Change L Addition
STREET ADDRESS				T ADDRESS	s l
CITY-ST-ZIP			2.4 CITY	1	?
TITLE		DELETE	3.1 1011		☐ Change ☐ Addition
HAME			3.2 NAME		
STREET ADDRESS			3 3 STREE	1 ADDRESS	S
CITY-S1-ZIP			3.4 CITY	- S1 - ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAM		
STREET ADDRESS			1	T ADDRESS	5
CITY-SI-7IP		DELETE	4.4 CITY- 5.1 TITLE		Change Addition
TITLE NAME		€7 pricit	5.2 NAME		E_j Change E_j Xudinga
STREET ADDRESS				T ADDRESS	
env et tib			5.3 SINES		' [

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 offect 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 chapped or on an attachment with an address. Pamela McErchery.

SIGNATURE: Samela (Cachery)

6.2 NAME

DELETE

407-365-5380

Change

Addition