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

NAME

STREET ADDRESS

City-ST-ZIP

May 14 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # H32346 (9)URBANWEST REALTY, INC. Principal Place of Business Mailing Address 4810 ROYAL PALM BCH BLVD 4810 ROYAL PALM BCH BLVD W.PALM BCH. FL 33411 W.PALM BCH, FL 33411-9187 3. Date Incorporated or Qualified 3a. Date of Last Report 12/04/1984 03/01/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-1896879 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation has liability for intangible tax under s. 199.032. Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MACLEOD, JANET 81 Name **12820 SHORE DR.** Street Address (P.O. Box Number is Not Acceptable) PALM BCH GARDENS FL 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 602 6502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for both, in the State of Florida, Such change was authorized by the corporation's hoard of directors. Thereby accept the appointment as registered agent. I am familiar with and a flory the obligations of, Section 602 0505, Florida Statules. SIGNATURE (NOTE: flegistered Agent signature required when reinstating) DATE 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. □ DELETE Change ■ Addition TITLE 1.1 1018 MACLEOD, JANET A 1.2 NAME NAME CR2E034 **12820 SHORE DR.** 13 STREET ADDRESS STREET ADDRESS PALM BCH GARDENS FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELFTE Change Addition TITLE 2.1 THLE TRIPP, STEPHEN A NAME 2.2 NAME 12820 S SHORE DR. STREET ADDRESS 23 STREET ADDRESS PALM BCH. GARDENS FL CITY-ST-ZIP 2 4 CH Y - ST - 7IP DELETE ☐ Addition Change TITLE 3 1 1 H CHASE, JEAN A 3.2 NAME NAME 13257 TANGERINE BLVD STREET ADDRESS 3.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 3.4 CITY - ST- ZIF TITLE DELETE 4.13016 Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIF DELFTE Change Addition TITLE 5.1 1/116 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-\$1-ZIP DETETE Change Addition TITLE 6.1 TITLE

FILED

14. I do 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 antagment with an address

6.4 CHY - ST - ZIP

6.3 STREET ADDRESS

6.2 NAME