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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name H62210 (0)

**REALM CONSULTANTS, INC.** 

FILED						
May 06 1998 8:00am						
Secretary of State						

Principal Place of Business Molling Address					81811 91811 91811 81911 1881	
Principal Place of Business Mailing Address						
2623 MCCORMICK DR STE 101		2633 MCCORMICK DR STE 101				
CLEARWATER FL 34619		CLEARWATER FL 34619		DO NOT WRITE IN THIS SPACE		
US		U\$		3. Date Incorporated or Qualified		
				06/17/1985		
	Place of Business	2a. Mailing Address 26. 2623 McCormi	ck Drive	4. FEI Number	Applied For	
Sulte, Apt	# etc	Suite, Apt. #, etc.	CK DI IVC	59-2542912	Not Applicable	
22	4, 810.	27 Suite 101		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	ile	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		26		Trust Fund Contribution	Added to Fees	
Zip	Country USA	Zip 33759 a	Country	8. This corporation owes or has paid the our	rent year Intangible	
24 337		[20]	USA	Personal Property Tax due June 30.	Yes No	
g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
	NG, KENNETH L.		81 Name			
2623 MCCORMICK DR			82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
STE 101			83			
C	LEARWATER FL 34619-8041		63			
			84 City	FL	85 Zin Code 33759	
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 hards of registered agent and title diapplicable. (NOTE Registered Agent signature required when reinstating)  DATE						
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND	NDIRECTORS IN 12	
TITLE	DP	☐ DELET <b>E</b>	1.1 TITLE		Change Addition	
NAME	KING, KENNETH L.		1.2 NAME			
STREET ADDRESS	1623 MCCORMICK DR STE 2	01	1.3 STREET ADDRESS	2623 McCormick Drive, Suite		
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY-ST-ZIP	Clearwater, Florida 33759		
TITLE	DS	DELETE	21 TITLE		Change Addition	
NAME	KING, M. SUSAN		2.2 NAME	•		
STREET ADDRESS		01	2.3 STREET ADDRESS	33759		
CITY-ST-ZIP	CLEARWATER FL		2. 4 C(TY - \$1 - Z(P	33733		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME	1		3.2 NAME			
STREET ADDRESS	1		3.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP		Change Addition	
TITLE		L.J DELETE	4.1 TITLE		CHANGE MOGILION	
NAME Street address			4. 2 NAME 4.3 STREET ADDRESS		ļ	
CITY-ST-ZIP			4.4 CITY - S1 - ZIP			
TITLE	=	DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS	1		5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	61 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
	cortifu that the information currylind wi	th this filing done not qualify for t		in Section 119 07(3)(i) Florida Statutes, Lifurther ca	tify that the information	

regreecy comy may the information supplied with this tiling 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 eath; 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.

4/28/98 813/791-1247