FILED Jun 09, 1999 8:00 am Secretary of State 06-09-1999 90018 027 ***550.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	H65082
1 Compretion Name		110000

GULF STATE REALTY, INC.

	THE HEILEN MO								
Principal Place	of Business	Mailing Address							
C/O ROBERT M	I. DUFF	C/O ROBERT M. DUFF							
1919 COURTNE		1919 COURTNEY DR., STE, 1	15			DO 1/07/1/5	NTE 181 TIME	. כמאפר	
FT. MYERS FL 33901 FT. MYERS FL 33901			DO NOT WRITE IN THIS SPACE						
US		US				3. Date Incorporated or Qualifed	1		
						07/08/1985			
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		<u> </u>	Applied For
21		26				<u>59-2560542</u>			Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		•	Additional Required
22		City 9 State							
City & State)	City & State				6. Election Campaign Financing Trust Fund Contribution			May Be Ito Fees
23	Country	Zip	Cour	ntr.	_	8. This corporation owes the cu	rrant waar In		1.0.000
Zip	Country		10	111 y		Personal Property Tax.	nem year m	Yes	□No
24	9. Name and Address of Curre		1			10. Name and Address of New	Registered		
	3. Name and Address of Curre	III registered rigera		81	Name				
DUFF	f, robert m.								
	COURTNEY DR.			82	Street Addre	ss (P.O. Box Number is Not Accep	table)		
SUIT				83	_				
	MYERS, 33901								
]			ſ	84	City		FL	85 Zij	Code
44 5	to the provisions of Sections 607.05	02 and 607 1508 Florida Statutos	the ah		named corno	ration submits this statement for th		<u> </u>	ts registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obligi	of Florida. Such change was aut	norizea	DV II	he corporation	n's board of directors. I hereby acco	ept the appo	intment as	registered
_	, , , , , , , , , , , , , , , , , , , ,								
SIGNATURE	Signature, typed or printed name of registered ag-	_			signature required	when reinstating)	DATE		
SIGNATURE	Signature, typed or printed name of registered age	_			signature required	when reinstating) ADDITIONS/CHANGES TO O		ND DIRECT	
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NOTE: R	Registered /	Agent	signature required	when reinstating) ADDITIONS/CHANGES TO O		ND DIRECT	
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AI	ant and title if applicable (NOTE: R	Registered /	Agent LE	signature required	when reinstating) ADDITIONS/CHANGES TO O			
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered age	ant and title if applicable (NOTE: R	13. 1.1 TITI 1.2 NAI	Agent LE ME	signature required	when reinstating) ADDITIONS/CHANGES TO O			
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M.	ant and title if applicable (NOTE: R	13. 1.1 TITI 1.2 NAI	Agent LE ME	ADDRESS	when reinstating) ADDITIONS/CHANGES TO O			Addition
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ant and title if applicable (NOTE: R	13. 1.1 TITI 1.2 NAI 1.3 STR	Agent LE ME REET	ADDRESS	when reinstating) ADDITIONS/CHANGES TO O			Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ant and title if applicable (NOTE: R ND DIRECTORS DELETE	13. 1.1 TITI 1.2 NAI 1.3 STE 1.4 CIT	Agent LE ME REET A Y-ST- LE	ADDRESS	when reinstating) ADDITIONS/CHANGES TO O		Change	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ant and title if applicable (NOTE: R ND DIRECTORS DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI	Agent LE ME REET A TY-ST- LE ME	ADDRESS	when reinstating) ADDITIONS/CHANGES TO O		Change	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ant and title if applicable (NOTE: R ND DIRECTORS DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI	Agent LE ME REET A TY-ST- LE ME REET A	ADDRESS - ZIP	when reinstating) ADDITIONS/CHANGES TO O		Change	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ant and title if applicable (NOTE: R ND DIRECTORS DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF	Agent LE ME REET / LE ME REET / TY-ST-	ADDRESS - ZIP	when reinstating) ADDITIONS/CHANGES TO O		Change	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ant and title if applicable (NOTE: R ND DIRECTORS DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 2.4 CIT 2.5 CIT 2.7 CIT	Agent LE ME REET / Y-ST- LE ME REET / TY-ST	ADDRESS - ZIP	when reinstating) ADDITIONS/CHANGES TO O		☐ Change	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ant and title if applicable (NOTE: R ND DIRECTORS DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CP 3.1 TITI 3.2 NAI	Agent LE ME REET / Y-ST- LE ME REET/ TY-ST	ADDRESS - ZIP	when reinstating) ADDITIONS/CHANGES TO O		☐ Change	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ant and title if applicable (NOTE: R ND DIRECTORS DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CP 3.1 TITI 3.2 NAI	Agent LE ME REET / Y-ST- LE ME REET / TY-ST	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	when reinstating) ADDITIONS/CHANGES TO O		☐ Change	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ant and title if applicable (NOTE: R ND DIRECTORS DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF	Agent LE ME REET / Y-ST- LE ME REET / TY-ST LE ME REET / TY-ST	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	when remstating) ADDITIONS/CHANGES TO O		☐ Change	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ent and title if applicable (NOTE: R ND DIRECTORS DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 3.4 CIT 3.5 TITI 3.5 TITI 3.7 NAI 3.8 TITI 3.7 NAI 3.8 TITI 3.9 NAI 3.9 TITI 3	Agent LE ME REET / Y-ST- LE ME REET / TY-ST TY-ST LE	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	when reinstating) ADDITIONS/CHANGES TO O		☐ Change	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ent and title if applicable (NOTE: R ND DIRECTORS DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CP 3.1 TITI 3.2 NAI 3.3 STF 3.4. CP 4.1 TITI 4.2 NAI	Agent LE ME REET / Y-ST- LE ME REET / TY-ST TY-ST TY-ST LE ME AME	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	when reinstating) ADDITIONS/CHANGES TO O		☐ Change	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ent and title if applicable (NOTE: R ND DIRECTORS DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CP 3.1 TITI 3.2 NAI 3.3 STF 3.4. CP 4.1 TITI 4.2 NAI	Agent LE ME REET / TY-ST- LE ME REET / TY-ST LE ME REET / TY-ST	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	when reinstating) ADDITIONS/CHANGES TO O		☐ Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	ent and title if applicable (NOTE: R ND DIRECTORS DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CP 3.1 TITI 3.2 NAI 3.3 STF 3.4 CP 4.1 TIT 4.2 NAI 4.3 STI	Agent LE ME REET / Y-ST- LE ME REET / TY-ST LE ME REET / TY-ST LE MF REET / Y-ST	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	when reinstating) ADDITIONS/CHANGES TO O		☐ Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	Int and title if applicable (NOTE: R) ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CP 3.1 TITI 3.2 NAI 3.3 STF 3.4 CP 4.1 TIT 4. 2 NAI 4.3 STI 4.4 CFI	Agent LE ME REET / TY-ST- LE ME REET / TY-ST LE ME REET / TY-ST LE LE REET / TY-ST LE	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	when remstating) ADDITIONS/CHANGES TO O		☐ Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	Int and title if applicable (NOTE: R) ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CP 3.1 TITI 3.2 NAI 3.3 STF 4.1 CP 4.1 TIT 4.2 NAI 4.3 STI 4.4 CP 5.1 TIT 5.2 NAI	Agent LE ME REET / LE ME REET / TY-ST LE ME REET / TY-ST LE ME REET / LE ME REET / LE MME REET / LE MME	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	when remstating) ADDITIONS/CHANGES TO O		☐ Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	Int and title if applicable (NOTE: R) ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CP 3.1 TITI 3.2 NAI 3.3 STF 4.1 CP 4.1 TIT 4.2 NAI 4.3 STI 4.4 CP 5.1 TIT 5.2 NAI	Agent LE ME REET / TY-ST- LE ME REET / TY-ST- LE ME REET / TY-ST- LE ME REET /	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	when remstating) ADDITIONS/CHANGES TO O		☐ Change	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI PD DUFF, ROBERT M. 1919-15 COURTNEY DRIVE	Int and title if applicable (NOTE: R) ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CP 3.1 TITI 3.2 NAI 3.3 STF 4.1 TIT 4.2 NAI 4.3 STI 4.4 CFF 5.1 TIT 5.2 NAI 5.3 STI	Agont LE ME REET / Y-ST- LE ME REET / TY-ST LE ME REET / TY-ST- LE ME REET / TY-ST- TLE ME REET / TY-ST- TLE ME REET / TY-ST- TLE ME REET / TY-ST-	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	when remstating) ADDITIONS/CHANGES TO O		☐ Change	Addition Addition Addition Addition

14. I hereby certify that the information supplied with his 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 or fin anapprincip with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

OF SIGNING OFFICER OR DIRECTOR

941278 5551