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

DOCUI 1. Corporation	MENT # H8079 2	2 (5)				•		
COLON	IAL BAY REALTY, INC.					 		
Principal Place of Business Mailing Address						i Bibil Hibit Ol	8)) 8)8)) B/G/I	
5220 S. STATE ROAD 7 FT. LAUDERDALE FL 33314 US		C/O DANCA, ANTHONY R. 24 N.W. 25 STREET DELRAY BEACH FL 33444-4320						
		US			3. Date Incorporated or Qualified		e of Last Re	eport
2 Principal P	lace of Business	2a. Mailing Address			10/15/1985 4. FEI Number	U2/U	5/1996	plied For
21 28		26			59-2597988			t Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc			5. Certificate of Status Desired		\$8.75 /	Additional
City & State City & State City & State 23 Pompano B.h., FL. 28					Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	May Be
Zip 330	64 Country 64 25 Brow AR	7 Zip	30 Cou	ntry	8. This corporation has liability for	_=	ax under s.	
	9 Name and Address of Currer		3V		10. Name and Address of New Re			
	LICA ANTHONIV D			81 Name		ж		
DANCA, ANTHONY R. 24 N.W. 25 STREET				82 Street Add	lress (P.O. Box Number is Not Acceptat	ole)		
DEL	RAY BEACH FL 33444			83				
				84 City		FL	85 Zip (Code
SIGNATURE	Signature Special procedus leading shindlag	en and fallent apposable (NC D DIRECTORS	OTE Registere	d Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE.	DIRECTOR	
YITLE	DP DELETE		11.11	TLE	Noomondon/Maco 70 off K	<u> </u>	Change	Addition
NAME	DANCA, ANTHONY R.		12 N/	AME				
STREET ADDRESS	24 N.W. 25TH ST.		1.3 ST	IREET ADDRESS				
CITY-ST-ZIP	DELRAY BEACH FL			TY-ST-ZIP				
TIFLE	D	☐ DFLETE	211			Į.	Change	Addition
NAME	DANCA, KAREN J.		22 N					
STREET ADDRESS	24 N.W. 25TH ST.			REET ADDRESS				
CITY-ST-ZIP TITLE	DELRAY BEACH FL	DELETE	3 1 10	ITY+ST-ZIP TLE			Change	Addition
NAME			3.2 N	1		_		
STREET ADDRESS				REET ADDRESS				
CITY - ST - ZIP			34.0	iTY-SI-ZIP				
TITLE		☐ DELETE	4111	TLE			Change	Addition
NAME			4 2 N	IAME				
STREET ADORESS			4.3 S	THEET ADDRESS				
CITY-ST-ZIP				TY-ST-7iP				
TITLE		☐ DELETE	5.1 10			l	Change	Addition
NAME			5.2 N					
STREET ADDRESS				IREET ADDRESS				
CITY - ST - ZIP		DELETE		TLE			Change	Addition
TITLE		<u>וון ענונונ</u>	6111			t	unange	L.J Addition
NAME expect approve			62 N	I				
STREET ADDRESS				IREET ADORESS				
CITY - ST - ZIP		a the first fit	64 C	TY-ST-ZIP	d in Cooting 110 07/3)/i) Florido Chatute	- I forethood		the

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 13 if changed, or or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-97

561-278-9537

FILED

Jan 14 1997 8:00am

Secretary of State