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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J30220

(4)

QUIK REALTY, INC.

Principal Place of Business 310 S. DILLARD ST. STE 305 WINTER GARDEN FL 34787 US		Mailing Address 310 S. DILLARD ST. STE 305 WINTER GARDEN FL 34797-3515 US				
				3. Date Incorporated or Qualified 08/25/1986	3a. Date of Last Report 03/05/1996	
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number 59-2711198	Applied For Not Applicable	
Suite, Apt #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	ate	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Z(p 24]	Country 25	Zip 29	Country 30	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
	MA, WILLIAM N.		81 Name			
	886 S. DILLARD ST.			Street Address (P.O. Box Number is Not Acceptable)		
BOX 1340				on of Address (F.O. Dox Northber is Not Acceptable)		
WINTER GARDEN FL 32787			B3			
			84 City		FL 85 Zip Code	
office or agent. I. SIGNATURE:	Signer we have a printed name of registeren ag	cott and fife if applicable. (NOT	E: Registered Agent signature requ	uired when reinstating)	1-21-9/	
	OFFICERS AN	ID DIRECTORS	13,	ADDITIONS/CHANGES TO OFFIC	· · · · · · · · · · · · · · · · · · ·	
TILLE	SUGGS, RALPH	DELETE	1.1 TITLE		Change Addition	
STREET ADDRESS	AL DOOLD STOPPE		1.2 NAME			
	WINTER GARDEN FL		1.3 STREET ADDRESS			
CITY - ST - ZIF	DV	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition	
NAME	SUGGS, C. JODIE	□ occeit	2.1 HILE 2.2 NAME		L. Onwige L. Audition	
STREET ADDRESS	OF BOOMS CENTER		2.3 STREET ADORESS			
CITY - ST - ZIP	WINTER GARDEN FL		2.4 CITY-ST-ZIP			
1011		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET AUDRESS			3.3 STREET ADDRESS			
CITY - \$1 - 715			3.4. CITY-ST-ZIP			
THILE		☐ DELETE	4.1 TITLE		Change Addition	
NAME	-		4.2 NAME	•		
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CiTY+ST-ZiP			
TITLE		DELETE	51 TITLE		Change Addition	
NAME			5.2 NAME			

14. Ido 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 ordine receiver or trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, byton an attachment with an address.

5 3 STREET ADDRESS

6 3 STREET ADDRESS

6.4 City-St-ZiP

54 CITY-ST-ZIP

61 TITLE

6 2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADORESS

C(1Y - S1 - Z(f)

CITY-ST ZIF

TITLE

NAME

TURE AND TYPED OR PRINTES NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

1,28.9/1 (407) 640- 0505

Change

Addition

FILED

Apr 01 1997 8:00am

Secretary of State