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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J30220

1. Corporation Name	220					
QUIK REALTY, INC.				J 1883118 8188 11711 88118 37818 11811 8811 8	idir didir didir didir	P) Bil Bibil (BA)
Principal Place of Business Mailing Address		*				
310 S. DILLARD ST. STE 305	310 S. DILLARD ST. STE 305					
WINTER GARDEN FL 34787	WINTER GARDEN FL 3478	7		DO NOT WRITE IN T	HIS SPACE	• •
US	UŞ			3. Date Incorporated or Qualifed 08/25/1986		
Principal Place of Business 2a. Mailing Address				4. FEI Number	I Ar	plied For
21 26				59-2711198	<u> </u>	ot Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	•		5. Certifcate of Status Desired	\$8.75	
City & State	City & State			6. Election Campaign Financing	\$5.00	May Be
Zip Country	7			Trust Fund Contribution	Added t	to Fees
24 25	29	Country 30		This corporation owes the current year Personal Property Tax.	Intangible Yes	□No
9. Name and Address of	Current Registered Agent			10. Name and Address of New Register	ed Agent	
ASMA, WILLIAM N.	other text	81	Name			
886 S. DILLARD ST.		82 Street Ad		dress (P.O. Box Number is Not Acceptable)		
BOX 1340		83		FTF 0.2 - 8 120 fall 0.00 to mail 480 fall	11 S A11 2 Jul 21611	Reicelen (ag)
WINTER GARDEN FL 32787						
010 0 0011000 05	****	84	City	For the state of t	85 Zip 0	
office or registered agent, or both, in the	07.0502 and 607.1508, Florida Statute State of Florida Such change was at	es, the above uthorized by t	-named cor the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap-	of changing its pointment as re-	registered gistered
	obligations of, section 607,0303; Flor	ioa Statutes.		•		
SIGNATURE Signature, typed or printed name of regist	ered agent and title if applicable. (NOTE:	Registered Agent	signature requir	red when reinstating) (DATE		
	RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE P	☐ DELETE	1.1 TITLE		51. P* 1. 159	Change	Addition
NAME DOUGLAS, LISA		1.2 NAME		· · · · · · · · · · · · · · · · · · ·		,
STREET ADDRESS 9020 PINE ISLAND ROAL		1.3 STREET	ADDRESS			ŕ
CITY-ST-ZIP CLERMONT FL 34711		1.4 CITY-ST	-ZIP			
TITLE DV	□ DELETE	2.1 TITLE			Change	☐ Addition
NAME SUGGS, C. JODIE		2.2 NAME				
STREET ADDRESS 91 BROAD STREET		2.3 STREET	ADDRESS			
CITY-ST-ZIP WINTER GARDEN FL + 2 - 4	r 176	2.4 CITY-ST	1			
TITLE SEES A SACRA LISA Y	DELETE	3.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition
NAME: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		3.2 NAME				
STREET ADDRESS		3.3 STREET	ADDRESS !			
CITY-ST-ZIP		3.4. CITY-ST		・ 一 ・		
TITLE NAME OF STREET OF STREET	☐ DELETE	4.1 TITLE		THE STATE OF THE S	Change 5	Addition
NAME SELLAR		4. 2 NAME				
STREET ADDRESS	5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1	43 STREET A	UUUBESS			

14. I 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 or an attachment with an address, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

☐ DELETE

SIGNATURE:

9020 PASE TRATE IT YOU

CLEMBERT FILL 2015

CITY ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

C. (1.3/18) (3

. 12,99 (407

656-0505 time Phone #

☐ Change

☐ Change

Addition

☐ Addition

CONTRACTOR OF THE CONTRACTOR

1 2