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 # J32843

43 (1)

SINGLETON'S REALTY CO. INC.

FILED Mar 26 1997 8:00am Secretary of State



520 N. RIDGEWOOD AVE. P O BOX 1175 DAYTONA BEACH FL 32114-2108 2. Principal Pace of Husiness 2a, Mailing Address 4, FEI Number	ast Report
3. Date Incorporated or Qualified 09/11/1986 3a. Date of Le 09/11/1986 06/05/19 2. Principal Prace of Business 2a. Mailing Address 4, FEI Number	ast Report
2. Principal Place of Business 2a. Mailing Address 4, FEI Number	
	96
	Applied For
21 26 59-2720659 Suite, Apt #, etc. \$8.	Not Applicable
Land Contificate of Status Desired	75 Additional se Required
	.00 May Be
23 28 Trust Fund Contribution	ded to Fees
24 25 29 30 Florida Statutes Yes No	301 8: 133 002,
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
SINGLETON, JAMES S., III	
22 BRIAN LANE 82 Street Address (P.O. Box Number is Not Acceptable)	***
PALM COAST FL 32137	
[83]	
84 City FL 85	Zip Code
11. Pursuant to this provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change	ing its registered
SIGNATURE Suppose type to protect panie of registered agont next tire it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	CTORS IN 12
THE POT DELETE THINKE SECT C. 16 for Che	
NAME SINGLETON, JAMES S.,III 12 NAME A-11 C.C. 2. SINA 1670 N	
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CITY ST 7P PALM COAST FL 14 CITY-ST-2IP PRI M COAST (F/, 32/)	<i>></i> /
1777-6, 57461664	ange Addition
STREET ADDRESS 2.2 NAME 2.3 STREET ADDRESS	
STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-71P 2.3 STREET ADDRESS 2.4 CITY-ST-71P	
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C(1) - S1 - 7/P 3.4 CITY - ST - ZIP	
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CHY-S1-ZE 44 CHY-S1-ZE	ange
1 TUF L DELETE 51TITLE L Che	ango LI Addition
STREET ADDRESS 5.3 STREET ADDRESS	
CHY-SI-7/P 5.4 CHY-SI-7/P	
TIBLE DELETE 6.1 TIBLE Che	ange Addition
NAME 6.2 NAME	
STREET ADDRESS	
amicranio (2)	

14. Loo 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SEANING OFFICER OF BURGETOR

3-20-97 9042576681