## 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 #** 1. Corporation Name

**FILED** Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90149 015 \*\*\*150.00

	REALTY & MANAGEMEN								
Principal Plac	e of Business	Mailing Address							
526 CENTRAL AVENUE 526 CENTRAL AVENUE									
SUITE 200 SUITE 200						DO NOT WR	ITE IN THIS	SPACE	
ST PETERSBURG FL 33701 ST PETERSBURG FL 33701						Date Incorporated or Qualifect			
US US						10/13/1986	•		
Principal Place of Business     2a. Mailing Address						4. FEI Number			Applied For
						59-2743758		<u> </u>	Not Applicable
26     Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.									5 Additional
					5. Certifcate of Status Desired			Required	
22     27 !						6, Election Campaign Financing		\$5.0	<b>0</b> May Be
23 28 28					Trust Fund Contribution	[_]		d to Fees	
Zip	Country	Zip	Cou	Country		This corporation owes the cur	rent year Int	angible	
<b>—</b> '	25	29	30			Personal Property Tax	,	Yes	□No
24	9. Name and Address of Curre		100	T		10. Name and Address of New	Registered	Agent	
_		<del></del>		81	Name				
HERETICK, KENNETH W.						(0.0.0.1)	-hle)		
715 MARCO DR. N.E.				82	Street Ad	dress (P.O. Box Number is Not Accep	(able)		
	PETERSBURG FL 33702			83	<del></del>				
,	21211020110112			"	}				
				84	City			85 Z	ip Code
	10	00 1007 4500 51-13-51-13-	+	hou		rporation submits this statement for the	nurnose of	changing	its registered
agent I a	am familiar with, and accept the oblig					ired when reinstating)	DATE		
12.	·	AND DIRECTORS	13.			ADDITIONS/CHANGES TO O	FICERS AN		
TITLE	PST	☐ DELETE 1		11 TITLE 12 NAME				Chang	ge 🗌 Addition .
NAME	Herenor, remem		12 N						
STREET ADDRESS	~ 1 10 th/1100 cm 11.c.		:35	TREET	TADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL		140	1.4 CITY+ST+ZIP					
TITLE	DVP	DELETE 2		2.1 TITLE				Chang	ge 🗌 Addition
NAME	HERETICK, KENNETH W.	HERETICK, KENNETH W. 22		2.2 NAME					
STREET ADDRESS			235	2 3 STREET ADDRESS					
CITY-ST-ZIP	ST. PETERSBURG FL		2.40	2.4 OTY ST ZIP					
THILE	EVP DELETE		3:1	3 1 TITLE				[] Chang	ge [] Addition
NAME	BURSIK, PETER D.		32 N	AME					
STREET ADDRESS			335	TREET	T ADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL		34 (	DITY - S	ST-7IP				
TITLE			411	ITLE				☐ Chang	ge 🗌 Addition
NAME	BURSIK, PETER D.		4 2 1	NAME					
STREET ADDRESS			435	TREET	TADDRESS				
CITY-ST-ZIP			-						
TITLE			140	ITY - S	T-ZIP				
I .		☐ DELETE	44C		1.ZIP			Chang	ge 🗌 Addition
NAME		DELETE		ITLE	1-ZIP			Chang	ge 🔲 Addition
NAME STREET ADDRESS		① DELETE	51T 52N	IT! E IAME	TADDRESS	<u> </u>		☐ Chan	ge 🔲 Addition
STREET ADDRESS			51T 52N 53S	IT! E IAME	T ADDRESS			☐ Chan	ge [] Addition
STREET ADDRESS		DELETE	51T 52N 53S	ITLE AME TREET	T ADDRESS			☐ Chan	
STREET ADDRESS CITY-ST-ZIP TITLE			51T 52N 53S 54C	ITLE AME TREET ITY-S	T ADDRESS				
STREET ADDRESS			51T 52N 53S 54C 61T	ITLE AME TREET ITY-S' ITLE AME	T ADDRESS				

14. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or suppliemental 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15 | 99 727 823-1230