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FILED  
Apr 02 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J41227 (6)  
1. Corporation Name  
T.J. REALTY, INC.



Principal Place of Business Mailing Address  
873 SE 47TH ST 873 SE 47TH ST  
CAPE CORAL FL 33904 CAPE CORAL FL 33904

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		11/06/1986	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Country		59-2744438	
24		29		30	
25		30		Applied For	
25		30		Not Applicable	
25		30		5. Certificate of Status Desired	
25		30		8.75 Additional Fee Required	
25		30		6. Election Campaign Financing	
25		30		Trust Fund Contribution	
25		30		5.00 May Be Added to Fees	
25		30		8. This corporation owes or has paid the current year Intangible	
25		30		Personal Property Tax due June 30.	
25		30		Yes No	

9. Name and Address of Current Registered Agent

REYNOLDS, THOMAS L.  
922 S.E. 14TH AVE  
CAPE CORAL FL

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETE
NAME	REYNOLDS, THOMAS L.	
STREET ADDRESS	2830 1ST ST	
CITY-ST-ZIP	MATLACHA FL	
TITLE	DST	DELETE
NAME	DILL, JOSEPH M.	
STREET ADDRESS	1402 S.E. 43RD TERR	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 on an attachment with an address.

SIGNATURE

*[Signature]*

3/30/98 (211) 543-1151

CR2E034 (10/97)