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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J77341

(2)

MARTIN COUNTY PROPERTIES, INCORPORATED

INICANTI	4 COURT PROPERTIES: 1	NOORFORKIED					
Principal Place of Business Mailing Address						-{	
,		•	•				
167 S.E. GOMEZ ROAD HOBE SOUND FL 33455 HOBE SOUND FL 33455						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						06/12/1987	
2, Principal Place of Business 2a. Mailing Address			· · · · · · · · · · · · · · · · · · ·			4. FEI Number Applied	d For
21		26					plicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				S8 75 Addit	
27						5. Certificate of Status Desired Fee Require	ed
City & Stat	е	City & State			6. Election Campaign Financing \$5.00 May	Ве	
23	2	28				Trust Fund Contribution	
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangit Personal Property Tax due June 30. Yes No	
24	9. Name and Address of Curre	29 30 30 Address of Current Registered Agent				Personal Property Tax due June 30. Yes No. 10, Name and Address of New Registered Agent	<u></u>
					Name	10, 100, 100, 100, 100, 100, 100, 100,	
BELL, JAMES E. 167 S.E. GOMEZ ROAD					D: (A L.)		
167 S.E. GUMEZ RUAU			ľ	82 Street Address		ess (P.O. Box Number is Not Acceptable)	
HOBE SOUND FL 33455			ļ:	83			
	DE 000115 (E 00105		-	84	City	■ 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.							
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, Flor	ida Statu	ites.	ne corporatio	or a rough of an actions. Thereby accept the appointment as rogic	noroa
SIGNATURE							
12.	Signature, typed or printed name of registered ag	ord and title if applicable (NOTE:	Registered	Agent	signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
TITLE	PD	DELETE	1.1 TITLE				Addition
NAME	BELL, JAMES E.		1.2 NAME				
STREET ADDRESS	444 4		1.3 STR	1.3 STREET ADDRESS			
CITY-ST-ZIP	HOBE SOUND FL		1.4 CITY-		ZIP		
TITLE	VD	DELETE	2 1 TITE	21 TITLE		Change	Addition
NAME	CROWE, JOHN V.		22 NAME				
STREET ADDRESS	SOUTH BEACH RD.		2.3 STREET		DDRESS		
CITY-ST-ZIP	HOBE SOUND FL			2. 4 CITY - ST - ZIP			
TITLE	STD	☐ DELETE	3.1 TITLE			Change	Addition
NAME .	TANDY, RUSSELL H.,JR.		3.2 NAME				
STREET ADDRESS	7 ISLE RIDGE WEST		3.3 STREET		odress		
CITY-ST-ZIP	HOBE SOUND FL	T oruste	3.4. CITY-		ZIP		A 4-100-
TITLE	D	□ DELETE	4.1 TITLE			Change	Addition
NAME	VAUGHAN, TAYLOR GEORG	E	4. 2 NAME				l
STREET ADDRESS	GOMEZ RD.		4.3 STREET				
CITY-ST-ZIP TITLE	HOBE SOUND FL	DELETE	4.4 CITY - S 5.1 TITLE		ZIF	Change	Addition
NAME		- occur	5.2 NAME		1	Unlange La	
STREET ADDRESS					ODRESS		i
CITY-ST-ZIP				5.3 STREET ADDRESS 5.4 CITY - ST - ZIP			
TITLE				6.1 TITLE		☐ Change ☐	Addition
NAME		_	6.2 NAN				
STREET ADDRESS				6.3 STREET ADDRESS			ľ

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 exportation 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 1

GALATURE JAME

1-9-98

561/546-3708

FILED

Jan 29 1998 8:00am

Secretary of State

;R2E034 (10/97)