## 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 #

(9)

RAYE PROPERTY M	ANAGEMENT, INC							
Principal Place of Business		Mailing Address				OLF DIDIA BIDIA BADAH 1841		
5111 8TH AVE. DR. W. BRADENTON FL 34209 US		5111 8TH AVE DR. W. BRADENTON FL 34209 US			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
			06/10/1987					
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For		
21		26			59-2826353	Not Applicable		
Suite, Apt #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
	Country 29	Zip Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
RAYE, MARCUS F., JR				Name				
5111 8TH AVE., DR.,, W BRADENTON FL 34209				82 Street Address (P.O. Box Number is Not Acceptable)				
			83					
			84	City	FL i	85 Zip Code		
11. Pursuant to the provisions of	Sections 607.0502 and	607,1508, Florida Statu	tes, the abovi	e-named corpo	oration submits this statement for the purpose of c	hanging 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	Signature, typed or printed name of lugistered agent and title if applicable	(NOIL A	egistered Agent signature r	required when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	S AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		☐ Change	Addition	
NAME	RAYE, MARCUS F., JR		1.2 NAME				
STREET ADDRESS	5111 8TH AVE., DR. W		1.3 STREET ADDRESS				
CITY-S1-ZIP	BRADENTON FL		1.4 CITY-ST-ZIP				
TITLE	D	DELETE	2.1 TITLE		Change	Addition	
NAME	RAYE, CATHY M.		2.2 NAME				
STREET ADDRESS	5111 8TH AVE., DR. W		2.3 STREET ADDRESS				
CITY-ST-ZIP	BRADENTON FL		2 4 CITY-S1-ZIP				
TITLE		DELETE	3.1 TITLE		Change	☐ Addition	
NAME			32 NAME				
STREET ADDRESS			3.3 STREET ADORESS				
CITY-SI-ZIP			3 4. CITY-ST-ZIP				
TITLE		DELETE	4.1 THILE		☐ Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY - ST - ZIP				
TITLE		DELETE	5.1 TITLE		☐ Change	☐ Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5 4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE		Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				

14. Thereby 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 on the receiver of the corporation with a puddress.

SIGNATURE:

941-794-5057

Apr 22 1998 8:00am

Secretary of State