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 # J80232

1. Corporation Name

AVANZINI REALTY, INC.

Principal Place of Busine	ess	M

ailing Address

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90157 023 ***300.00



3009 E. GULF TO LAKE % BRADSHAW & MOUNTJOY. P.A. INVERNESS FL 34453 209 COURTHOUSE SQUARE US INVERNESS FL 32650			DO NOT WRITE 3. Date Incorporated or Qualifed 06/30/1987	IN THIS S	SPACE]			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number			Applied For	
21		26				59-2839447			Not Applicable	1
Suite, Apt.	#aetc	Suite, Apt. #, etc.=				أخام فستنجف المتابي المتابية والمتابية والمتابية		-\$8:75	• Additional	-~
22	., 515.	27				5. Certifcate of Status Desired		Fee	Required	}
City & State	9	City & State				6. Election Campaign Financing		\$5.0	0 May Be	1
23		28				Trust Fund Contribution			d to Fees	
Zip	Country	Zip	Countr	y		8. This corporation owes the curren	t vear Inta	naible]
24	25	29 3	in i			Personal Property Tax.		☐Yes	□No	
24	9. Name and Address of Current	. 42 24	1	-		10. Name and Address of New Re	stered A	gent]
			81	1 Na	ame]
MOU	INTJOY, S. MICHAEL						· · · · · · · · · · · · · · · · · · ·			-
209 COURTHOUSE SQUARE		82	St	treet Addres	ss (P.O. Box Number is Not Acceptable	e)			1	
INVE	RNESS FL 32650		83	3						1
{]
			84	4 Ci	ity		FI	85 Zi	p Code	-
						Land to the state of the state of		handing	ite registered	┨
office or re agent. I as	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligation	i Florida. Such change was aut	horized by	y the ⊲	corporation	's board of directors. I hereby accept t	he appoin	tment as	registered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	Registered Age	ent sign	nature required s	when reinstating)	DATE] 🥫
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	CERS AND	DIREC	TORS IN 12	ğ
TITLE	PD	☐ DELETE	1.1 TITLE					☐ Chang	e	1 5
NAME	AVANZINI, CHARLES W.		1.2 NAME		İ					4
STREET ADDRESS	3009 E GULF TO LAKE HWY		1.3 STREE	ET ADD!	RESS					F034
CITY-ST-ZIP	INVERNESS FL 34453		1.4 CITY-	•	ŝ					1 5
TITLE	STD	☐ DELETE	2.1 TITLE					☐ Chang	e Addition	5 [
NAME	AVANZINI, RICHARD P		2.2 NAME	:						
	3009 E GULF TO LAKE HWY		2.3 STREI		nores					
STREET ADDRESS	INVERNESS FL 34453									-
CITY-ST-ZIP	HAVEHIAEOO LE O4400	☐ DELETE	2.4 CITY- 3.1 TITLE					Chang	e Addition	1
TITLE			3.1 IIILE							
NAME			1							
STREET ADDRESS			3.3 STRE		•					
CITY-ST-ZIP		C) per erre	3.4. CITY-		P			Chang	e Addition	1
TITLE		☐ DELETE	4.1 TITLE		}					1
NAME:			4. 2 NAME		- 1					1
STREET ADDRESS			4.3 STREI	ET ADD	DRESS					1
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	<u> </u>					-
TITLE		☐ DELETE	5.1 TITLE		ĺ			☐ Chang	e Addition	
NAME			5.2 NAME		}					
STREET ADDRESS			5.3 STRE	ET ADD	DRESS					
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	·					1
TITLE		☐ DELETE	6.1 TITLE					Chang	je 🔲 Addition)
NAME			6.2 NAME		-					
STREET ADDRESS			6.3 STREE	ET ADD	ORESS					
CITY-ST-7/P			6.4 CITY-	ST-ZIP	,					
1 G(17-2)*4P										_

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, with all other like empowered.