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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J85652

(2)

LOFT PROPERTIES, INC.

Principal Prace of Business Mailing Address						t samina mas total milla milla divise suer a		MIL MIRLI BIRIT B	1811 1801
C/O ROBERT VI 9751 MONTANA BONITA SPRING		9751 MONTANA CT.	C/O ROBERT VALENTINE LOFT 9751 MONTANA CT. BONITA SPRINGS FL 34135-4707						·
						3. Date Incorporated or Qualified 07/29/1987 01/23/1996			
2. Principa¹ Pt	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21	D. M. C. F. C.	26				NOT APPLICABLE			t Applicable
Suite, Apt	#, etc.	Suite. Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	
22	, at the control of t	27						Fee Re	
City & State	9	City & State	 			6. Election Campaign Financing	F1	\$5.00	
23		28				Trust Fund Contribution	<u> </u>	Added t	
Ζιρ	Country	Zip 11		Country		8. This corporation has liability for i			199.032,
24	25 29 30 9. Name and Address of Current Registered Agent		[30]			Florida Statutes Yes No 10. Name and Address of New Registered Agent			
DOD!		ent negratorou Agent		81	Name	IV. Hattie died Address di Heir He	giotorea	- goin	
ROBERT VALENTINE LOFT 9751 MONTANA CT.						, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			82 Street			ess (P.O. Box Number is Not Acceptab	ie)		
BUNI	ITA SPRINGS FL 33923-0793			83					
									_
				84	City		FL	85 Zip (Code
11 Pursuant	to the provisions of Sections 607.0	502 and 607 1508. Florida Sta	tutes the a	bove	-named corn	oration submits this statement for the p	urnose o	f changing it	s registered
office or re	egistered agent, or both, in the St m familiar with, and accept the ob	ate of Florida. Such change wa	is authorize	d by	the corporat	ion's board of directors. I hereby accep	t the app	ointment as	registered
SIGNATURE	max								
Signature: typed or partied name of registered agent and life it applicable. INOTE 12. OFFICERS AND DIRECTORS				Registered Agent signature require 13.		ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE EDS ANI	DIBECTOR	S IN 12
TITLE	PD	DELETE	1.17	IT I F		ADDITIONS/CHANGES TO OFFIC	LIIO AINL	Change	Addition
NAME	LOFT, ROBERT VALENTINE		1.2 N						
STREET ADDRESS	9751 MONTANA CT.				ADDRESS				
	BONITA SPRINGS FL								
CITY-ST-ZIP TITLE				1.4 CITY - ST - ZIP 2.1 TITLE				Change	Addition
NAME	VD LOFT, JOAN ELLEN			2.2 NAME					
STREET ADDRESS	9751 MONTANA CT.			2.3 STREET ADDRESS					Ì
CITY-ST-ZIP	BONITA SPRINGS FL		2 4 CITY - ST - ZIP			2.7			,
Tille		DELETE	311		A. Ell			Change	Addition
NAME			3.2 N						
STREET ADORESS					ADDRESS				
CITY-S1-ZIF					ST-ZIP				
TITLE		DELETE	4.1 T					Change	Addition
NAME			4.21	NAME					
STREET ADDRESS					ADDRESS				
CITY - ST - 21P					T-712				
THE	.,	DELETE	5.1 T					Change	Addition
NAME			5.2 N	IAME					
STREET ADDRESS			5.3 \$	TREET	ADDRESS				
CITY-ST-ZIP					T- <i>I</i> IP				
TITLE		DELFTE	6.1 T					Change	☐ Addition
NAME			6.2 N	IAME					
STREET ADDRESS			6.3 S	TREET	ADDRESS				
CITY - ST - ZIP			6.4 0	ITY-S	T- ZIF				

14. I do 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:

7 JANUARY 1997 941-495-1803

FILED

Jan 15 1997 8:00am

Secretary of State