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PROFIT
CORPORATION
ANNUAL REPORT

1997

CITY-ST-ZIF



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 30 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K85645

(5)

MID-FLORIDA REAL ESTATE INFORMATION. INC.

Principal Place of Business Mailing Address % EVERETT S. GRAVES % everett 8. Graves 6058 W. DOUNERAY LOOP 8058 W. DOUNERAY LOOP CRYSTAL RIVER FL 32629 CRYSTAL RIVER FL 34429-7505 3a. Date of Last Report 3. Date Incorporated or Qualified 05/04/1989 04/25/1996 Principal Place of Business Mailing Address 4. FEI Number Applied For 21 59-2943712 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Ζıp 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 Florida Statutes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GRAVES, EVERETT S. **6058 WEST DOUNERARY LOOP** 82 Street Address (P.O. Box Number is Not Acceptable) **CRYSTAL RIVER FL 32629** 83 84 City 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** Signature, lyped or printed name of registered agent and little if applicable (NOT: Registered Agent signature required when reinstalling) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. DELETE Change Addition TITLE 11100 NAME GRAVES, EVERETT S. 1.9 NAME 6058 W DOUNERAY LOOP STREET ADDRESS 1.3 STREET ADDRESS CRYSTAL RIVER FL CITY-ST-ZIP 14 CHY-ST-ZIP DELETE Change ☐ Addition TITLE 2110116 GRAVES, BRENDA P. NAME 2.2 NAME **6058 W DOUNERAY LOOP** STREET ADDRESS 2.3 STREET ADDRESS **CRYSTAL RIVER FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELF1E 4.1 TITLE Change \_\_\_ Addition TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 C(11y - S1 - Z)P DELETE Change Addition TITLE 5.1 TOLE 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

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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 eath; 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.