## 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

## **FILED** Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90041 026 \*\*\*150.00

## **DOCUMENT # K93768** 1. Corporation Name

REALTY OPERATIONS, INC
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Principal	Place	of	Business			

11404 COUNTRY OAKS DR

Mailing Address

11404 COUNTRY OAKS DR



US :	1AMPA FL 33024 US			DO NOT WRITE IN THIS SPACE			
		00		3. Date Incorporated or Qualifed	]		
-1				06/08/1989			
	lace of Business	2a. Mailing Address	1	4. FEI Number	Applied For		
2100	LOKESTONE DR	26 3 20 LK	KESTONE	17,59-3004911	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
TAN		28		Trust Fund Contribution	Added to Fees		
Zio	Country	Zip	Country	8. This corporation owes the current year Intan	ngible		
336		29 3 3 6 1 8 30	HILLSBOW	Personal Property Tax.	igible ∐Yes Mo		
, 4100	9. Name and Address of Current R	gistered Agent		10. Name and Address of New Registered Ag	gent		
1140	NHART, BETTY L. D4 COUNTRY OAKS DRIVE PA FL 33624		81 Name B G RA 82 Street Add 3 3	I HART RETTY LITERS (P.O. Box Number is Not Acceptable)  O LAKE STONE DR			
			84 City	tm 19 FL	85 Zip Code		
office at r	to the provisions of Sections 607.0502 ar registered agent, or both, in the State of F im familiar with, and accept the obligation	lorida. Such change was auth	norized by the corporati	poration submits this statement for the purpose of chion's board of directors. I hereby accept the appoint	nanging its registered ment as registered		
SIGNATURE							
	Signature, typed or printed name of registered agent and		agistered Agent signature require	ed when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12		
12	OFFICERS AND D	DELETE	13.		Change Addition		
INLE	PST PST		1.2 NAME				
	BARNHART, BETTY L		1.2 NAME	DILE OF ALL DE IN	4 "		
STREET ADDRESS			1.3 STREET ADDRESS	BARNHART, BETTY 1 3120 LAKESTONE DR TAMPA, PC 33618			
:- St ZIP	TAMPA FL 33624	DELETE	1.4 CMY-ST-ZIP	14 mrs, 26-33618	☐ Change ☐ Addition		
HILE				."			
-			2.2 NAME				
MEET ADDRESS			2.3 STREET ADDRESS		)		
ST ZIP			2. 4 CITY-ST-ZIP		Change Addition		
mr.F		☐ DELETE	3.1 TITLE	· ·	Change Addition		
		·	3.2 NAME		}		
···· <u>·</u> i address		į	3.3 STREET ADDRESS				
ST ZIP			3.4. CITY-ST-ZIP				
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			4, 2 NAME		1		
· ·· · · TAUDALSS			4.3 STREET ADDRESS				
ST ZIP			4.4 CITY-ST-ZIP				
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-	ļ	į	5.2 NAME				
· ··· · I ADDRESS			5.3 STREET ADDRESS		Ì		
ST-ZIP	1		5.4 CITY-ST-ZIP				
57.21		☐ DELETE	6.1 TITLE		Change Addition		
·	-		6.2 NAME -				
-			6.3 STREET ADDRESS				
THE PROPERTY OF	ĺ		EACITY ST 7ID	•			

- ST-ZIP

64 CITY-ST-ZIP

1. 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.