## 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 # L14557

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MOTSETT REALTY, INC.

FILED Mar 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
2460 SE SHIPPING RD PO BOX 7721						
PORT ST LUCIE FL 34952			PORT ST. LUCIE FL 34985		DO NOT WORK IN THE COLOR	
US		US	U\$		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 09/06/1989	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0144415	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	
Zip	Country Zip Cou		try	8. This corporation owes or has paid to	he current year Intangible	
24	25	29	30		Personal Property Tax due June 30.	
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Regist	tered Agent
MO	TSETT, W. JAMES JR			B1 Name		
	0 SE SHIPPING RD RT ST. LUCIE FL 34952		82 Street Ad		ddress (P.O. Box Number is Not Acceptable)	
PU	KI 31. LUDIE FL 34832			B3		
			-	B4 City		85 Zip Code
						FL   S   Zip coos
11. Pursuant to office or reagent. I ar	o the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o	.0502 and 607.1508, Florida Stati State of Florida. Such change was abligations of, Section 607.05 <mark>05, f</mark>	utes, the ab s authorized florida Statu	ove-named c by the corpo tes.	orporation submits this statement for the purp oration's board of directors. I hereby accept th	ne appointment as registered
SIGNATURE						DATE
12.	Signature, typed or printed name of registree	AND DIRECTORS	13.	Agent signature re	equired when reinstating)  ADDITIONS/CHANGES TO OFFICER:	
TITLE	P	DELETE	1.1 TIT	F T	ADDITIONO/CITATOES TO CITACES	Change Addition
NAME	MOTSETT, CAROLE M.		1.2 NA	1		_ ,
STREET ADDRESS	2460 SE SHIPPING RD			EET ADDRESS		
	BODT OF LUCIE CI			r-St-zip		<u> </u>
CITY-ST-ZIP TITLE	VP	DELETE	2.1 TIT			Change Addition
NAME	MOTSETT, W. JAMES J	_ vaccin	2.2 NA	1		
	2460 SE SHIPPING RD			EET ADDRESS		ļ
STREET ADDRESS	PORT ST LUCIE FL					
CITY-ST-ZIP TITLE	DELETE		3 1 TIT	Y-ST-ZIP		Change Addition
NAME			3.2 NA			
				EET ADDRESS		
STREET ADDRESS			t t	Y-ST-ZIP		
CITY-ST-ZIP TITLE			3.4. UI 4.1 TIT			Change Addition
		0	4. 2 NA	-		Print According from Connections
NAME						
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		DELETE	5 1 TH	r-ST-ZIP		Change Addition
TITLE		المراداة				F-1
NAME			5.2 NA			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		DELETE	_	(-ST-ZIP		Change Addition
TITLE		☐ DETER	6.1 T(§)			L) Orlange L) Addition
NAME			6.2 NA			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP			6 4 CIT	/-ST-ZIP		

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 13 if changed, or on an attachment with an address.

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1) James Motatt

W. James More

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