SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L19472** **(4)**

1. Corporation Name
ADMIRALTY REALTY CORPORATION

Principal Place of Business	Mailing Address
101 FLAMINGO DRIVE APOLLO BEACH FL 33572	101 FLAMINGO DRIVE APOLLO BEACH FL 33572

3. Date Incorporated or Qualified: 09/11/1989
3a. Date of Last Report: 09/27/1995

2. Principal Place of Business
21 244 APOLLO BEACH BLVD
22 Suite, Apt. #, etc
23 City & State: APOLLO BEACH FL
24 Zip: 33572
25 Country: HILLSBOROUGH

2a. Mailing Address
26 SAME
27 Suite, Apt #, etc.
28 City & State: SAME
29 Zip: SAME
30 Country: SAME

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~SEBALD, WANDA~~
~~6529 BIMINI~~
~~APOLLO BEACH FL 33572~~

10. Name and Address of New Registered Agent

81 Name: DARIUS G. McCLINTOCK
82 Street Address (P.O. Box Numbers Not Acceptable): 6209 Marbella Blvd.
83 Apollo Beach, FL
84 City: FL 85 Zip Code: 33572

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: Darius G. McClintock, DARIUS G. McCLINTOCK (President) 6-25-96
Signature, type or print name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD SEBALD, MERLE L. 101 FLAMINGO DR., "E" APOLLO BEACH FL	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	President DARIUS G. McCLINTOCK 244 Apollo Beach Blvd. Apollo Beach, FL 33572 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SEBALD, WANDA L. 101 FLAMINGO DR., "E" APOLLO BEACH FL	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	Secretary GAIL PAZAN McCLINTOCK 244 Apollo Beach Blvd. Apollo Beach, FL 33572 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Darius G. McClintock DARIUS G. McCLINTOCK 7-8-96 (813)645-4141
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #