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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT# L 20566

1. Corporation Name

FILED Jun 01, 2000 8:00 am Secretary of State

06-01-2000 90277 001 ***300.00

	ealty Firm,	inc.							
	ncipal Place of Business Mailing Address					{			
2058A	2058A E. Edgewood Dr. P.O.				1763				
Lakel	and, Fl. 338	03 Eaton Park, Fl.]			
					3840	DO NOT W		IIS SPACE	
-					- 0 . 0	3. Date Incorporated or Qualife	ď		·
2. Principal Place of B	usiness	2a. Mailing	Address		· · · · · · · · · · · · · · · · · · ·	10/5/89 4. FEI Number			
21		26				i			Applied For
Suite, Apt. #, etc.		Suite, Ap	pt. #, etc.		·	59- 2972970			Not Applicab
22		27				5. Certifcate of Status Desired			5 Additional Required
City & State		City & S	tate			6. Election Campaign Financing			<u>`</u>
710		28				Trust Fund Contribution			00 May Be ed to Fees
Zíp J	Country	Zip		Country		8. This corporation owes the cur	rrent year t		or to rees
4	[25]	29		30		Personal Property Tax.		Yes	□No
9. Na	ne and Address of Current	Registered Age	ent			10. Name and Address of New	Registere		
George	W. McGee			81	Name				=
2025 9	ylvester Road	a o 1		82	Street Addre	ss (P.O. Box Number is Not Accept	ahla)		
Lakola							abic)		•
Dakera	iiu, FI 330	803.		83					
				84	City			- In all 191	
11 Pursuant to the pro-	doions of Castles - COZ 0500			, , ,	•		FL	_ 85 Zip	Code
office or registered	igent, or both, in the State of	and 607.1508, Fl f Florida. Such ch	lorida Statute lande was au	s, the above-	named corpor	ation submits this statement for the s board of directors. I hereby accep	purpose of	f changing in	ts registered
agent. I am iamiliar	with, and accept the obligation	ons of, Section 60	07.0505, Flori	ida Statutes.	ie corporation	s board of directors. I hereby accep	ot the appo	intment as r	registered
SIGNATURE SIGNATURE DE	ed or printed name of registered agent a								
Lightener, typ	to or printed name of registered agent a								
2.	OFFICERS AND	DIPECTORS	(NOTE: F		signature required w		DATE		
2.	OFFICERS AND	DIRECTORS		13.	signature required w	nen reinstating) ADDITIONS/CHANGES TO OF		ND DIRECT	ORS IN 12
2. Pres:	OFFICERS AND Ldent	DIRECTORS	(NOTE: F	13. 1.1 TITLE	signature required w			ND DIRECT	
z. TLE Pres. Georg	OFFICERS AND Ldent Je W. McGee	DIRECTORS	DELETE	13. 1.1 TITLE 12 NAME					
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SIGNATURE:

941-667-0991

Attachment 1686

				Country		1 8	 This corporation owes the c 	surrent year int	angibte	· ſ	Пo
	Country	Zip		Coursey			Decoporal Property Tax.				
Zıp	25	29	30			10). Name and Address of Ne	w Registered	Agent		
24	9. Name and Address of Current I	Registered Agent		81	Name						
	J. 110			0.			Not Acc	entable)			
	Macaa			82	Street /	Address	(P.O. Box Number is Not Acc	cpico.c,			
Geor	ge W. McGee	c 1		l	\						
2025	Sylvester Road,	5-1		83							
r.ake	eland, Fl 3380	3		<u> </u>				F٤	85	Zip Ci	ode
				84	1 '					no its t	agistare
	to the provisions of Sections 607.0502				e-named	corporat	ion submits this statement for	the purpose of ccent the appo	intment	as reg	istered
	the provisions of Sections 607.0502	and 607.1508, Flori	ida Statutes, i	rized by	the corp	poration's	board of directors. I neleby a	сосру			
11. Pursuant office or re	to the provisions of Sections 607.0502 agistered agent, or both, in the State o in familiar with, and accept the obligati	Florida, Such Chair one of Section 607.	0505, Florida	Statutes	5.						
agent, I ar	m familiar with, and accept the obligation	3/13 01, 0000-						DAIE			
			(NOTE: Res	istered Age	ent signature (e required with	en rounstating) ADDITIONS/CHANGES TO	OFFICERS A	ND DIR	ECTO	RS IN 1
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	DIDECTORS		13.			ADDITIONS/CHARGES 15		c	hange	☐ Ad
12.	OFFICERS AND	DIRECTORS	DELETE	1.1 TITLE							
TITLE				12 NAME							
' '	President				ET ADDRESS						
* NAME	George W. McGee	_ , .	1	1		~					
STREET ADDRESS	lanar culvester	Road, S-	- 1	1.4 CITY-				<u>- </u>		hange	☐ Ad
CITY-ST-ZIP	Lakeland, Fl 3	3803 🗀 (OELETE	21 TITLE		1					
TITLE	Dakeranay			22 NAME	<u> </u>						
	Country	Zip		Count	ry		8. This corporation owes the	e current year I	ntangio Y []	ie '	□No
Zip		29	30	3]		Ì	Personal Property Tax.				
24	25			7			10. Name and Address of N	lew Registere	a Agen	<u>-</u>	
	9. Name and Address of Curren	Registered Agen		8	1 Name	ne					
•	_			L			a D. M. Jana in Not A	centable)			
j Ge	eorge W. McGee			8	2 Stree	et Addres:	s (P.O. Box Number is Not Ad	ceptable			
21	025 Sylvester Roa	d, S-1		ļ							:
T	akeland, Fl 33	803		8	:3						P +
ļ	akerana, 2-			-	4 City				85	Zip	Code
							_	F	<u> </u>	┸_	- • -
			side Ctatulac	the abo	ve-name	ed corpora	ation submits this statement for	or the purpose	of chan	ging its	regisiei oisteren
11. Pursuant	to the provisions of Sections 607.050, registered agent, or both, in the State	2 and 607,1506, Fig of Florida, Such cha	ange was auth	orized b	y the cor	rporation'	s board of directors. I hereby	accept the app	Ollitanei	K 05 10	giute
office or	registered agent, or both, in the State am familiar with, and accept the obliga	tions of, Section 607	7.0505, Florid	a Statute	es.						
!							instatual	DATE			
SIGNATURE	Signature, typed or printed name of registered ager	it and title if applicable.	(NOTE: R		gent signature	we redoked w	hen reinstating) ADDITIONS/CHANGES T	O OFFICERS	AND DI	RECTO	ORS IN
12.	OFFICERS AN	ID DIRECTORS		13.			ADDITIONS/CITATIONS			Change	A
ļ	Т		DELETE	1.1 11714	E				_		
TITLE	President			1.2 NAM	E						
NAME	George W. McGee		_	1.3 STREET ADDRESS		ss					
STREET ADDRESS	2025 Sylvester R	load, S-1	1	14 CiTY-ST-ZIP		1					
CITY-ST-ZIP	Lakeland, Fl	33803	DELETE	2.1 TITL				_		Change	
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