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 # L22471

(1)

FILED Jan 29 1998 8:00am Secretary of State

RESORT REALTY OF FT. LAUDERDALE, INC.				
				[] #34 Tion Diag
Principal Place of Business	Mailing Address			
3400 NE 34TH STREET 3400 NE 34TH STREET FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308		ine		
FI. LAGDERDALE PE 55500	FI. LAUDENDALE FL 300	iQ0	DO NOT WRITE IN THIS	SPACE
			3. Date Incorporated or Qualified	
			10/10/1989	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt, #, etc.	Suite, Apt. #, etc.		65-0156405	Not Applicable
22 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State			6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the co	urrent year Intangible
24 25	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No
9. Name and Address of Curren	it Registered Agent	81 Name	10. Name and Address of New Registered	Agent
DUNN, CHARLES B		oi Name		
3400 NE 34 STR FT LAUDERDALE FL 33308		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
FI ENDDERDALE FE 33300		83		··
		84 City	FI	85 Zip Code
11. Pursuant to the provisions of Sections 607,050	2 and 607.1508, Florida Statut	es, the above-named corp		
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation.	of Florida. Such change was a ations of, Section 607.0505, Fk	authorized by the corporati orida Statutes.	ion's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE				
Signature, typed or printed name of registered age		Registered Agent signature require		D DIDEOTODO IN 140
12. OFFICERS AND	DELETE DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME DUNN, CHARLES		1.2 NAME		
STREET ADDRESS 1529 MIDDLE RIVER DR		1.3 STREET ADDRESS		
CITY-ST-ZIP FT LAUDERDALE FL		1.4 CITY-ST-ZIP		
TIPLE	DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP	- Daries	2. 4 CITY-ST-ZIP	<u> </u>	
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY - ST - ZIP	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-SI-ZIP		5.4 CITY-ST-ZIP		··
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		1
STREET ADDRESS		C D OYDERY LEGGER		I
CITY-ST-ZIP		6.3 STREET ADDRESS 6.4 CITY-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 truestee 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.

SIGNATURE:

TO REQUIRED

1,9/98 954-86-2203

CR2E034 (10/97)