FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L33736

(4)

BOBBY BYRD REAL ESTATE, INC.

FILED
May 07 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address					E INDIEDIA BOD DILOK ILIIA NOODE DISAN DALI U			
BYRD, ROBERT		BYRD, ROBERT W						
1208 S. MYRTLE AVE. CLEARWATER FL 34616		1208 S. MYRTLE AVE. CLEARWATER FL 34616-34	1208 S. MYRTLE AVE.					
US		US US	· · · · · · · · · · · · · · · · · · ·		3. Date Incorporated or Qualified	3a. Date of Last Re	oporl	
					12/01/1989	07/08/1996	,	
2. Principal P	lace of Business	2a. Mailing Address	2a, Mailing Address		4. FEI Number		plied For	
21		26			59-2980061	Not Applicable		
Sulte, Apt. #, etc.		· ·	Suite, Apt. #, etc.		5, Certificate of Status Desired	5. Certificate of Status Desired See Required		
City & State		City & State	City & State				· ·	
23		hη *	28		6. Election Campaign Financing Trust Fund Coatribution	tion Campaign Financing \$5.00 May Be st Fund Contribution Added to Fees		
Zip			Country		B. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30			Yes No	100.002.,	
	g, Name and Address of Curr	ent Registered Agent		4	10. Name and Address of New Rec	istered Agent		
	D, Robert W		81	Name				
1208 S MYRTLE AVENUE			82	82 Street Address (P.O. Box Number is Not Acceptable)				
CLE	ARWATER FL 34616							
			83					
			84	City		85 Zip (Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508. Florida Statut	es the above	e-named co	orporation submits this statement for the po	FL of changing its	registered	
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was a	authorized bi	z the corpo	oration's board of directors. Hereby accept	the appointment as	registered	
•	m rammar with, and accept the ob-	ilgations of, Section 607,0505, Fix	onda Siaidie	S.				
SIGNATURE	Signature, typed or printed name of repetered	agent and the if applicable (NO)	£ Registered Age	ont signature re	equired when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	S IN 12	
TITLE	D	☐ DELETE	1.1 BILE			Change	Addition	
NAME	BYRD, ROBERT W.		1.2 NAME					
STREET ADDRESS	1208 S. MYRTLE AVE.		1.3 STREET	ľ				
CITY-ST-ZIP	CLEARWATER FL	resident Delle	1.4 CITY-S	ST - ZIP			171	
TITLE NAME	Robert W. Byrd, P	162100VL	21 HILL 22 NAME	-	President	☐ Change	Addition	
STREET ADDRESS			23 STREET	APIDDECC	Robert W. Byrd wenue			
CITY-ST-ZIP			2.4 City-		Clearwater PL 341	616		
TITLE		DELETE	3.1 TITLE	01 - 711	Secretary	☐ Change	Addition	
NAME		_	3.2 NAME		Robert W. Byrd			
STREET ADDRESS			3.3 STREET	ADDRESS	same as above			
CITY-ST-ZIP			3.4. C(1Y-	\$1- <i>71</i> P	20 MG NE MOING			
TITLE		☐ DELFTE	4.1 Trille		Treasurer	Change	Addition	
NAME			4. 2 NAME		Robert W. Byrd			
STREET ADDRESS			4.3 STREET	ADDRESS	same as above			
CITY-ST-ZIP		···	4.4 CHY-S	1 - Z(P	TAIL IS NOOL	·	., <u></u>	
TITLE		L DELETE	5.1 TITLE			☐ Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET				j	
CITY-ST-ZiP		DELETE	5.4 CHY - S	1-20°		[] ^	A parenta.	
TITLE		LL DILIFTE	6.1 701 (☐ Change	Addition	
NAME STREET ADDRESS			6 2 NAME	Abbrete				
			6.3 STREET	İ			İ	
14. I do hereb	by certify that the information suppl	lied with this filing does not quali-	6.4 CITY-S fy for the exe	n-ZIP Imption stat	ted in Section 119.07(3)(i), Florida Statutes	. I further certify that t	he	
informatio	n indicated on this annual report o	r supplemental annual report is t	rue and acco	irate and th	hat my signature shall have the same legal.	offect as if made und	for nath: that i	
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 Statules; and that my name appears in Block 12 or Block 13 if thanged, or on an attachment with an address.								