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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L42973 1. Corporation Name

LABELLE REAL ESTATE, CO.

FILED Mar 16, 1999 8:00 am Secretary of State 03-16-1999 90006 027 ***150.00



Principal Place of Business US 1. POR DR SR LABRILE FL 39875 2. Principal Place of Business 2. A Milling Address 3. Carb Incorporated or Coulded 0.111/1/980 3. Do NOT WRITE IN THIS SPACE 3. Do NOT WRITE IN THIS SPACE 3. Do NOT WRITE IN THIS SPACE 3. Do Not Incorporated or Coulded 0.111/1/980 3. Do Not Incorporated or Coulded 0.1111/1/980 3. Do Not Incorporate Revision of Coulded 0.1111/1/980 3. Do Not Incorporate Revision of Coulded 0.1111/1/980 3. Do Not Incorporated or Coulded 0.0111/1/980 3. Do Not Incorporated or Coulded 0.0111/1/980 3.										
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2. Principal Place of Business 2. Mailing Address 4. FEI Number Applied For Not Not Applied For Not	03					3. Date in	corporated or Qualifed			
Sulfe, Apl. #, etc.)					01/11	/1990	·	_	
Suite, Api, #, etc. Suite, Api, #, etc.	Principal Place of Business 2a. Mailing Address					4. FEI Nu			Applied For	
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Zp	Suite, Apt. #, etc. Suite, Apt. #, etc.						E Cartifonto of Status Decired			
Zip Country Zip Country 2	City & State City & State						1 1 1 1 2 2 2			
S. Name and Address of Current Registered Agent CRAICHY, SHARON S 360 N. BRIDGE ST. LABELLE FL 33975 44 City FL 85 Street Address (P.O. Box Number is Not Acceptable) 86 Street Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Street Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Name 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 15. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Stabutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the Corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by the corporation's board of directors. I hereby accept the appointment as registered agent. I am advanced by t		Country	Zip	Count	ry	8. This co				
CRAICHY, SHARON S 350 N. BRIDGE ST. LABELLE FL 33975 11. Pursuant to the provisions of Sections 607 0502 and 607 1506, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment are registered agent. I am familiar with, and accept the obligations of Section 607 0502 and 607 1506, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment are registered agent. I am familiar with, and accept the obligations of Section 607 0505, Floridal Statutes, the above-named corporation's board of directors. I hereby accept the appointment are registered agent. I am familiar with, and accept the obligations of Section 607 0505, Floridal Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PRAICH, SHARON S STREET ADDRESS TITLE D CRAICHY, SHARON S 360 N. BRIDGE ST. ABBILLE FL 33935 12. LABELLE FL 33935 12. LABELLE FL 33935 12. LABELLE FL 33935 13. TITLE D CRAICHY, SHARON S 360 N. BRIDGE ST. LABELLE FL 33935 14. CITY ST.2P LAGESCELE FL 33935 14. CITY ST.2P 15. TITLE D CHARGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PARCELLE FL 33935 14. CITY ST.2P 15. TITLE D CRAICHY, SHARON S 360 N. BRIDGE ST. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PARCELLE FL 33935 16. CITY ST.2P 17. CHARGE STREET ADDRESS 18. TITLE D CHAR	24	25	29	30					□No	
CRAICHY, SHARON S 360 N. BRIDGE ST. LABELLE FL 33975 44 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.3 TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.2 ADDITIONS/CHANGES TO OFFI		9. Name and Address of Cur	rent Registered Agent			10. Name	and Address of New Registe	red Agent		
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360 N. BRIDGE ST. LABELLE FL 33975 84 City 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 907.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, or familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 12. OFFICERS AND DIRECTORS 13. STREET ADDRESS STREET ADDRESS 360 N. BRIDGE ST. LABELLE FL 33935 14. OTY ST.2P 14. OTY ST.2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CHAICH, SHARON S 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 24. WARE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CHAICH, SHARON S 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. OTY ST.2P 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 24. WARE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 24. WARE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 24. WARE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 24. WARE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 24. WARE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 24. WARE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 24. WARE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 24. WARE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 25. WARE 25. WARE 26. WARE 26. WARE 27.				8	2 Stree	Address (P.O. Box Number is Not Acceptable)				
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Signature, typed of printed range of registered agent stignature, required where instituting) DATE	office or re agent. I a	edistated agent or both in the Sta	ate of Florida. Such change was a	autnorizea d	ov the co	rporation's board of d	irectors. I hereby accept the a	ippointment as	registered	
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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 suppliemental 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 12 or Block 13 if changed, or on an appear with an address, with an address, with an address.

SIGNATURE:

OR DIRECTOR