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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L51746

(0)

7001 LAKE ELLENOR DRIVE REALTY, INC.

Principal Place	e of Business	Mailing Address							
4200 WACKENI SUITE 110 PALM BEACH (l							
US		US	US			3. Date Incorporated or Qualified 02/16/1990	ied 3a, Date of Last Report 05/01/1996		
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		A	pplied For
21		26				65-0180722			ot Applicable
Suite, Apt		Suite, Apt. #, etc.				5. Certificate of Status Desired		Fee Re	Additional equired
City & State	e 	City & State				6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zφ	Country	Zip	Cou	untry		8. This corporation has fiability for in	ntangible f	ax under s	. 199.032,
24	25	29	30	,			Yes [
	9. Name and Address of Curren	i Registered Agent		B1]	Nama	10. Name and Address of New Re	jistered A	gent	
	NIGAN, JOHN F			""	Name				
	FLOOR, BARNETT CENTRE			82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
	N. FLAGLER DRIVE			83			·		
W. F	PALM BEACH FL 33401			63					
				84	City		FL	85 Zip	Code
11. Pursuant t	to the provisions of Sections 607.050;	and 607.1508. Florida Stat	utes, the a	pove	-named corp	oration submits this statement for the p		changing i	ts registered
office or n	egistered agent, or both, in the State	of Florida. Such change was	s authorize	d by	the corporat	oration submits this statement for the p ion's board of directors. I hereby accep	t the appo	intment as	registered
	m raminar wan, and accept the obliga	(((0))5 01, 060((0)) 007,0003, 1	ionua ola	llulos	•	•			
SIGNATURE	Signature: typed or printed name of registered agei	nt and tille if applicable (No	OTE: Registere	ed Ager	nt signature requir	ed when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOF	RS IN 12
TITLE	DPT	☐ DELETE	1,1 T	ITLE		— · · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME.	TAMBONE, RICHARD P.		1.2 N	IAME					
STREET ADDRESS	4200 WACKENHUT SR., SUITE	110	1.3 \$	TREET	ADDRESS				
CITY - ST - 7IP	PALM BEACH GARDENS FL		1.4.0	ity-st	I - ZIP				
TOLE	DVS	DELETE	211	ITLE			ļ	Change	Addition
NAME	TAMBONE, LORI B.		2.2 N	IAME					
STREET ADDRESS	4200 WACKENHUT DR., SUITE	110	2.3 S	TREET	ADDRESS				
CITY - ST - ZIP	PALM BEACH GARDENS FL		2.41	CITY - S	T-ZIP				
THTLE		☐ DELETE	317	ITLE	[ı	Change	Addition
NAME			3.2 N						
STREET ADDRESS			3.3 S	TREET	ADDRESS				
CITY - S1 - ZIP		T DELETE		CITY-S	7-ZIP		······································	Champa	T Addition
TITLE		☐ DELETE	411					Change	Addition
NAME				NAME					
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP		☐ DELETE		IIY-SI	r-ZIP			Change	Addition
TITLE Araba:		F Detrik	5.1 T 5.2 N					circulic	ADDRESS .
NAME expect annouse			- 1		ADDRESS				
STREET ADDRESS				CITY-SI					
CITY - ST - ZIF		☐ DELETE	61 T		, - 41			Change	Addition
NAME			6.2 N						
STREET ADORESS					ADDRESS				
CITY-ST-ZIP) TY-\$1	· 1				
14. I do heret	by certify that the information supplied	with this filing does not au	alify for the	exe	mption stated	in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the
informatio Lam an of	on indicated on this annual report or s	upplemental annual report is the receiver or trustee empo	s true and owered to	accu	rate and that	my signature shall have the same lega t as required by Chapter 607, Florida S	l effect as	if made un	nder oath; thai

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-97

561-675-0008 Deytime Phone N

FILED

May 08 1997 8:00am

Secretary of State