


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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # L60367 (4) 1. Corporation Name LARRY KELLEY REALTY, INC.		



Principal Place of Business 1035 PARK AVE. SUITE 1 ORANGE PARK FL 32073	Mailing Address 1035 PARK AVE. SUITE 1 ORANGE PARK FL 32073
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1120 Park Ave. Suite, Apt. #, etc. 22 City & State 23 Orange Park, Fl. 32073 Zip Country 24 32073 25 Clay		2a. Mailing Address 26 1120 Park Ave. Suite, Apt. #, etc. 27 City & State 28 Orange Park, Fl. 32073 Zip Country 29 32073 30 Clay		3. Date Incorporated or Qualified 03/27/1990	
		4. FEI Number 59-3045163		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent KELLEY, LAWRENCE ABNEY 1035 PARK AVE SUITE 1 ORANGE PARK FL 32073				10. Name and Address of New Registered Agent 81 Name KELLEY, LAWRENCE ABNEY, III 82 Street Address (P.O. Box Number is Not Acceptable) 1120 Park Ave. 83 84 City Orange Park, FL 85 Zip Code 32073			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Lawrence A. Kelley, III* Lawrence Abney KELLEY, III April 24, 1998
(Signature typed or printed name of registered agent and title acceptable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VPTD	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	PTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KELLEY, LAWRENCE A.			1.2 NAME	KELLEY, LAWRENCE A. III		
STREET ADDRESS	2572 HOLLY POINT ROAD			1.3 STREET ADDRESS	12503 GRAFTON CT.		
CITY-ST-ZIP	ORANGE PARK FL			1.4 CITY-ST-ZIP	JACKSONVILLE, FL. 32246		
TITLE	PSD	<input type="checkbox"/> DELETE		2.1 TITLE	VPSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KELLEY, FRANCES L.			2.2 NAME	KELLEY, FRANCES L.		
STREET ADDRESS	2572 HOLLY POINT ROAD			2.3 STREET ADDRESS	2572 W. HOLLY PT.		
CITY-ST-ZIP	ORANGE PARK FL			2.4 CITY-ST-ZIP	ORANGE PARK, FL. 32073		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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 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 attachment with an address.

SIGNATURE *Lawrence A. Kelley, III* April 24, 1998 001/261-8005
(Signature typed or printed name of registered agent and title acceptable) (NOTE: Registered Agent signature required when reinstating) DATE

CR2E034 (10/97)