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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # L79158

(6)

ANCHOR REALTY AND MORTGAGE COMPANY OF ST. GEORGE ISLAND

Principal Place of Business

Mailing Address

FILED May 22 1998 8:00am Secretary of State



212 FRANKLI	IN BLVD ISLAND FL 32328	212 FRANKLIN BLYD ST GEORGE ISLAND FL 32	2328	DO NOT WRITE IN TH 3. Date incorporated or Qualified	IS SPACE
				06/11/1990	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 4	FRANKLIN Blud		<u>lin Blud</u>	59-3014672	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
	once Island FL	28 St George Isl		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
ヹ ^ヹ ロスス?	BAS 25 FRANKIN	29 32338 3	Country USP OFRANKI		current year Intangible Yes 🔲 No
	9. Name and Address of Current F	Registered Agent		10. Name and Address of New Register	ed Agent
MONOD, SANDRA M. 212 FRANKLIN BLVD ST GEORGE ISLAND FL 32328 81 Name Ducime Here - Monod Sign Address (P.O. Box Number is Not Acceptable) H9 FRANKLIN Blvd 82 Sign Address (P.O. Box Number is Not Acceptable) H9 FRANKLIN Blvd 83 CitySt George Island 84 CitySt George Island 85 Zip Code 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
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 for 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 Signature, typed or printed name of registerial again and fill of applicable. (NOTE Registered Agent signature required when reinstating). DATE					
12.	OFFICERS AND I	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	STDP	DELETE	1.1 TITLE		Change
NAME	DUCIMETIERE-MONOD, OLIVER	1	1.2 NAME) to a	` `
STREET ADDRESS	212 FRANKLIN BLVD		1.3 STREET ADDRESS	119 FRANKLIN Blud	~ ~ ~ ~
CITY-ST-ZIP	\$T GEORGE ISLAND FL 32328		1.4 CITY-ST-ZIP	Stigeorge Island Fl	32328
TITLE		DELETE	2.1 TITLE	J	Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	· 		2. 4 CITY - ST - ZIP		
TITLE		☐ DEL e te	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	,-		3.4. CITY-ST-ZIP		
TITLE	· 	DELETE	4.1 TITLE	-	☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY+ST-ZIP			4.4 CITY - ST - ZIP	<u> </u>	
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE	\wedge	☐ DELETE	6.1 TITLE		☐ Change ☐ 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 of 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 reference of the corporation or the reference of the corporation or the reference of the corporation of the corporation of the corporation of the corporation of the reference of the corporation of the corporat					