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

CORPORATION ANNUAL REPORT

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	ANNUAL REP 1998	7.7	Secretary of State DIVISION OF CORPORATIONS			Secretary of State	<u>,</u>	
Ę	OCUMENT Corporation Name		9 (3)					
	PINE CREST RE	EALTY, INC.						
Pr	incipal Place of Busines	SS	Mailing Address				- + (60) 001) (1) (900 0 (1)) 01() 01() 01() 01() 01() 01()	
	750 SW 64TH ST. RD.		5750 SW 64 ST RD					
OCALA FL 34474 US			OCALA FL 34474 US				DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualified	-
							03/24/1988	
	Principal Place of Busi	ness	2a. Mailing Address				4, FEI Number Applied For	_
21	Suite, Apt. #, etc.		26 Suite Act # etc				59-2894759 Not Applicable	_
22	Guile, Apr. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired See Required	
==1	City & State		City & State				6. Election Campaign Financing \$5.00 May Be	_
23			28				Trust Fund Contribution Added to Fees	
	Zip				intry		8. This corporation owes or has paid the current year Intangible	_
24 25 29 30							Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent	_
FLOYD-ERBY, PATRICIA F. 5750 SW 64 ST RD					81	Name		
OCALA FL 34474					82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
00/104112 044/4			63			The state of the s	1	
			84 City		City	lan 7- O-da	4	
							FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered ligent, or both, in the State of Florida, Such change was suffering						-named corpo	pration submits this statement for the purpose of changing its registered	1
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered ligent, or both, in the State of Florida. Such change was authorized by the corporation's bagent. I am familiar with, and accept the oblightions of Section 607.0505, Florida Statutes.							or a board or directors. Thereby accept this appointment as registered	-
SIGNATURE Structure, typed or printed name of registero's eyent and title if applicable (NOTE Register							1-11-78	
12		OFFICERS AND I		13.	a Ager	it signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	\dashv
TITL	E PST	PST DELETE			1.1 TITLE		Change Addition	4
NAN		ERBY, PATRICIA F.		1.2 NAME		ĺ		1
STR		N 64 ST RD		1.3 \$1	REET	ADDRESS		
	-ST-ZIP OCALA	FL	-	1.4 CI	TY-ST	- ZIP		╛
TITL	1 -	EDBY BATDIOLA F	☐ DELETE				Change	1
	NAME FLOYD-ERBY, PATRICIA F. STREET ADDRESS 5750 SW 64 ST RD		22 N					
	-ST-ZIP OCALA					ADDRESS		1
TITL		· •	DELETE	3.1 Tr	ITY-ST	1-414	☐ Change ☐ Addition	┨
NAN				3.2 N/			_ Stange _ Morton	
STR	EET ADDRESS			3.3 ST	REET A	ADDRESS		
CITY	-ST-ZIP			3.4. C	ITY-SI	- ZIP		
TITL			☐ DELETE	4.1 TITLE			☐ Change ☐ Addition	1
NAM				4. 2 N				١
	ET ADDRESS					ODRESS		1
CITY	-ST-ZIP		☐ DELETE	4.4 CI		- ZIP	Channe District	1
				5.1 Til 5.2 NA			LJ Change LJ Addition	
	EET ADDRESS					.DDRESS		
	-ST-ZIP			5.4 CI				
TITL			DELETE	6.1 TIT			☐ Change ☐ Addition	1
NAM	E			6.2 NA	ME		· · ·	
STRE	ET ADDRESS			6.3 ST	RÉET A	DDRESS		1

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, of on an attachment with an address.

6.4 CITY-ST-ZIP

FILED

Jan 20 1998 8:00am