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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M77390

1. Corporation Name

DAUTEL REALTY, INC.

FILED
Apr 27, 1999 8:00 am
Secretary of State
04-27-1999 90047 018 ***150 00

Principal Place	e of Business	Mailing Address						
1301 MONUMEN	NT ROAD	1301 MONUMENT ROAD	1301 MONUMENT ROAD SUITE 9					
SUITE 9								
JACKSONVILI.E	FL 32225	JACKSONVILLE FL 32225			DO NOT WRITE IN THIS SPACE			
US		US			3. Date Incorporated or Qualifed			ĺ
					04/21/1988			
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Ap	p ied For
21		26	26				Not Applicable \$8.75 Ac ditional	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			59-2909034 5. Certificate of Status Desired			
22		27	City & State				Fee Re	beriup:
City & State							\$5.00	Nav Be
23		28				6. Election Campaign Financing S5.00 Na Trust Fund Contribution Added to F		
Zip	Country	Zip	Country		8. This corporation owes the cum	ent vear Lits		
	<u> </u>	——— · · · · · · · · · · · · · · · · · ·			Personal Property Tax.	ent year int	Yes	[]No
24	25		30		10. Name and Address of New I	Registered		
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New I	(egisteren)	- Igoin	
DAIL	TEL DADDADA		18'	Name				ì
	TEL, BARBARA		82	Street Add	ress (P.O. Box Number is Not Accept	able)		
	MONUMENT ROAD							
SUIT			83					
JACH	KSONVILLE FL 32225		_	<u> </u>				
			84	City		Fi	85 Zip (Ccde (
agent. I a SIGNATURI:	Tamiliar with, and accept the oblig	is) aut	BAR	LOARA 1	Autel ad when reinstating)	9/23 DATE	189	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	OR 3 IN 12
TITLE	PSD	☐ DELETE	1,1 TITLE				Change	Addition
NAME	DAUTEL, BARBARA		1,2 NAME	}				
	1301 MONUMENT ROAD, #9			T ADDRESS				
STREET ADDRESS								İ
CITY-ST-ZIP	JACKSONVILLE FL 32225	□ DELETE	1.4 CITY-5	51-ZIP			Change	Addition
TITLE		C) perele	2.1 TITLE				□ Gridinge	
NAME			2.2 NAME					ł
STREET ADDRES			2,3 STREE	T ADDRESS				j
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME			3.2 NAME	Ì				
STREET ADDRES			33 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE		DELETE	4,1 TITLE				Change	☐ Addition
NAME			4. 2 NAME					
				TADDRESS				
STREET ADDRESS)
CITY-ST-ZIP		☐ DELETÉ	4.4 CITY-S	91-ZIP			Change	Addition
TITLE		LJ DELEIK	5.1 TITLE 5.2 NAME				عو <u>ت</u>	
NAME				T. 4000500				j
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP			5.4 CITY- S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE	}			Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				}
CITY OF 710			6.4 CITY-5	ST-ZIP				ļ

14. I hereby certify that the information supplied with his filing does not qualify for the exemption stated in Section 119.07(\$\(\)(1)\), Florida Statutes. I further ce tify that the information indicates on this annual report or supplemental ar nual 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 correspondition or the receive or trustee empowered to execute this report as required by Chapter 307. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an advices, with all other like empowered.

SIGNATURE: