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

PROFIT **CORPORATION** ANNUAL REPORT 1998 DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

(1)

COMMANDER REAL ESTATE, INCORPORATED

FILED May 08 1998 8:00am Secretary of State



Principal Plac		`	g Address	. 					
1% W.J. COMMANDER, SR. 1% W.J. COMMANDER, S 621 NORTH TYNDALL PARKWAY 621 NORTH TYNDALL P. PANAMA CITY FL 32404 PANAMA CITY FL 32404				PARKWAY		DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 06/08/1988			
2. Principal P	lace of Business	2e, Ma	iling Address			4. FEI Number			Applied For
21		26	·			59-2901509		_	Not Applicab
Suite, Apt.	#, etc.		te, Apt. #, etc.						Additional
22		27				5. Certificate of Status Desired			Required
City & Stat	ė	City	y & State			6. Election Campaign Financing Trust Fund Contribution			May Be
Zip	Country	Zip		Count	ry	8. This corporation owes or has p	aid the cur		
24	25	29		30		Personal Property Tax due Juni	9 30. 🗜	Yes	□ No
	9. Name and Address of Curr	ent Registere	d Agent			10. Name and Address of New R	egistered /	gent	
CC	OMMANDER, WILLIE J JR			8	Name				
621 NORTH TYNDALL PARKWAY PANAMA CITY FL 32404				8:	2 Street Add	ress (P.O. Box Number is Not Accepta	ble)		
	HAMIN OUT LE SEADA			8:	3				
				8	City			85 Zij	p Code
						poration submits this statement for the tition's board of directors. I hereby acception	FL		
SIGNATURE	V Signature, typed or printed name of registered a OFFICERS A	grint and little if app		TE: Registered A	geni signalure requ	ired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND	DIRECTO	ORS IN 12
TITLE	P		DELETE	1.1 TITLE		7.50.11.01.01.01.01.01.01.01.01	021101110	Change	
NAME	COMMANDER, WILLIE J JR	}		1.2 NAME					
STREET ADDRESS	443 NORTH STAR AVE.			1.3 STAE	T ADDRESS				
CITY-ST-ZIP	PANAMA CITY FL			1.4 C/TY	ST-ZIP				
TITLE			DELETE	2.1 TITLE				Change	Additio
NAME				22 NAME					
STREET ADDRESS				2 3 STRE	ET ADDRESS				
CITY-ST-ZIP				2. 4 CITY	-ST-ZIP				
TATLE			☐ DELETE	3.1 TITLE				☐ Change	Additio
NAME				3.2 NAME					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP	<u></u>		DELETE	3 4. CITY	-ST-ZIP			Change	Additio
TITLE			☐ britis	4.1 TITLE				unarige	
NAME ATTACK ADDRESS				4. 2 NAM					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP TITLE			DELETE	4.4 CITY-				Change	Additio
NAME				5.1 HILE	1				
					T AODRESS				
STREET ADDRESS									
CITY-ST-ZWP TITLE			DELETE	5.4 CITY-				Change	Additio
NAME			_ veen	6.2 NAME				-1 Autube	- Ind regality
STREET ADDRESS					T ADDRESS				
CITY-ST-2IP									
UI(1-51-ZIP				64 CITY-	21.11				

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 waters, excitess.