## 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

(5)

SOUTHEAST ART EXCHANGE, INC.

## FILED Apr 23 1998 8:00am Secretary of State

(407)740-5610

SOUTH	east art exchange, inc	<b>G.</b>				
Principal Place	e of Business	Mailing Address				i samumus sak tibuk tibasi madal sikus asak dilan milati asak bilati dilati milati dilati milati sikek
768 HAROLD WINTER PARK		768 HAROLD AVE WINTER PARK FL 32789				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 06/28/1988
2. Principal P	lace of Business	26, Mailing Address				4, FEI Number Applied For
21		26				<b>59-2903923</b> Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired See Sequired \$8.75 Additional Fee Required
City & State	e ·	City & State				6. Election Campaign Financing \$5.00 May Be
23]		28				Trust Fund Contribution Added to Fees
Zφ	Country	Zip	Cou	intry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. X Yes No
	g, Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered Agent
	.DER, CHARLES D.			81	Name	
WINTER PARK FL 32789				82	82 Street Address (P.O. Box Number is Not Acceptable)	
				83		
				84	City	85 Zip Code
				$\perp$		oration submits this statement for the purpose of changing its registere
SIGNATURE	Signature type for postest naise of registere Lago OF FICERS AN	D DIRECTORS	13.		of signature require	ed which resistating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
Tette	OADIAN DODEDE OLEMA	☐ DECENE	111			☐ Change ☐ Additi
NAME	GARVIN, ROBERT GLENN		12 N			
STREET ADDRESS	239 ESCONDIDO CIRCLE ALTAMONTE SPRINGS FL		- 1		ADDRESS	
CITY - ST - ZIP TITLE	ALIAMONIE OFFINOS FL	DELITIE	14 C	HY-SI	1 - ZIP	Change Addition
NAME		, strike	2 2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				CITY-S	į.	
TITLE		Doethe	311			Change Addition
NAM{			3 ? N	AME		
STREET ADDRESS			3 3 5	THEET	ADDRESS	
CITY-ST ZIP	,	<del></del>	3 4. 6	ITY · S	T - 71P	
TITLE		☐ DELFTE	4 1 T			L_ Change L_ Addition
NAME			4 2 1			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		DELETE	44C 511	HY-SI	1 - ZIP	Change Addition
TITLE NAME			51 II			C. Strange Notice
STREET ADDRESS					ADDRESS	
CITY-ST ZIP				174 - ST		
TITLE		DELETE	61 T			Change Addition
NAME		<del></del>	62 N			· ·
STREET ADDRESS					ADDRESS	
CHY-ST-7IP				ITY - ST		
14. I hereby o	certify that the information supplied w	oth this filing does not qualify	for the ex	empt	ion stated in S	Section 119.07(3)(i), Florida Statutes. I further certify that the informatio e shall have the same legal effect as if made under oath; that I am an
officer or		eiver or trustee empowered to				e shall have the same legal effect as it fillade under dalif, that ham an lired by Chapter 607, Florida Statutes; and that my name appears in