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

PROFIT CORPORATION ANNUAL REPORT 1999

SIGNATURE:

DOCUMENT # M98890

STANDARD REALTY CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90006 012 ***150.00

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,		* ,	* *			
	10	Mailing Address			1 1	22 - 1 1 BOORBOUL SOU LENDS HONER LONION COURT BOOK GROUN BROKE BLACK COURT BROKE FOOL
Principal Place		1300 3RD STR SO				
1300 3RD STR STE 302A	50	STE 302A				
NAPLES FL 339	40-7239	NAPLES FL 33940-7239				DO NOT WRITE IN THIS SPACE
US		US				3. Date Incorporated or Qualifed
						09/14/1988
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				65-0110782 Not Applicable \$8.75 Additional
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Required
22		City & State	- 			6. Election Campaign Financing \$5.00 May Be
City & State	e	28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Count	try		8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax.
24	9. Name and Address of Current	_ 				10. Name and Address of New Registered Agent
			8	31	Name	
	CH, PAUL M.			32	Street 6	Address (P.O. Box Number is Not Acceptable)
) 3RD ST. S.		1	-	00011	,
	#302-A		8	33		
NAPI	LES FL 33940-7239			34	City	85 Zip Code
			[-	FL T
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Stati	utes, the abo	ove	named o	corporation submits this statement for the purpose of changing its registered eration's board of directors. I hereby accept the appointment as registered
office or re	egistered agent, or both, in the State of an idiniliar with, and accept the obligati	t Florida. Such change was ons of, Section 607.0505, F	lorida Statut	es.	Se corpo	and is board or directors. Thereby accept the appointment as regions
SIGNATURE	1 Dr. I m Kind	DOOD TODATO	ح كور	F	- \$	3/15/99
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NO	TE: Registered A	gelit	Signature re	required then reinstating) DAFE
12.	OFFICERS AND		13.		·1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	D	☐ DELETE	1.1 ΠΠ.		ļ	Onlings Tradition
NAME	BURCH, MASON M.		1.2 NAM		1	
STREET ADDRESS	1300 3RD STR SO STE 302A				ADDRESS	}
CITY-ST-ZIP	NAPLES FL	□ DELETE	1.4 CITY		-ZIP	☐ Change ☐ Addition
TITLE	D		2.1 TITL			
NAME	BURCH, AGNES N.		2.2 NAV			
STREET ADDRESS	1300 3RD STR SO STE 302A				ADDRESS	
CITY-ST-ZIP	NAPLES FL	☐ DELETE	2. 4 CIT		1-ZIP	Change Addition
TITLE	D BUDCH HEATHED I		3.2 NAM		ļ	
NAME	BURCH, HEATHER L. 1300 3RD STR SO STE 302A				ADDRESS	
STREET ADDRESS			3.4. CIT			
CITY-ST-ZIP	NAPLES FL D	DELETE	4.1 TITL		-417	Change Addition
TITLE NAME	BURCH, PAUL M.	<u></u>	4.2 NA			
STREET ADDRESS	4000 000 0TO 00 0TE 0004				adoress	
i :	NAPLES FL		4.4 CIT			
TITLE	IWI LLO I E	☐ DELETE	5.1 TITL		~ "	· Change Addition
ί '	Ì		5.2 NAN		İ	
NAME STREET ADDRESS	1				ADDRESS	.
			5.4 CITY			j
CITY-ST-ZIP		☐ DELETE	6.1 TITL			☐ Change ☐ Addition
NAME			6.2 NAN	ΛE		
PERCET ADODESE			63 STB	PET	ADDRESS	

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 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 with an address, with all other like empowered.