## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 15 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N37384

(7)

## SUWANEE REAL ESTATE ORGANIZATION, INC.

Principal Place of Business Mailing Address								-	; ( <b>0 )</b> (130) <b>100</b> (133) <b>100</b> (110) <b>10</b>			OIL WIRSE SURV
1815 W HOARD ST LIVE OAK FL 32060			LIVE OF	1815 W HOWARD ST LIVE OAK FL 32060-4313								
US			US						3. Date Incorporated or Qualified 04/02/1990	3a. Date of 04/3	Last R 30/19	eport <b>96</b>
2. Principal P	Place of Busin	<u> </u>	2a. Mailing Address 26					4. FEI Number 59-3144131	Applied For  Not Applicable			
Suite, Apt.	#, etc.	Suit	Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional Fee Regulred				
City & Stat	e	City	City & State					6. Election Campaign Financing \$5.00 May Be				
Zip	· ·	<del></del>	28 Country					Trust Fund Contribution Added to Fees				
— ·	}	Country	<u> </u>	Zip Country				8. This corporation has liability for intangible tax under s. 199,032,				
24		25] and Address of Cur	29 cent Registered						Florida Statutes Yes I No  10. Name and Address of New Registered Agent			
	<b>9.</b> 1101110	and Addiess of Out	TOTAL TIOGISTOTOL	a Agoili		81	Name		U. Maine and Address of New Ne	Jisteren Ağeri	1	
RANKIN MARY P						82						
	HOWARD					Street	Address	ddress (P.O. Box Number is Not Acceptable)				
	K FL 32060											
LIVE OA	IN FL 32000	, ,				83						
						84	City			FL 85	'	
office or r	registered ag	ons of Sections 617.0 ent, or both, in the St th, and accept the ob	ale of Florida. S	uch change was	authorize	d by	the corp	d corporation's	tion submits this statement for the p s board of directors. I hereby accep	urpose of char t the appointm	ging its ent as	s registered registered
SIGNATURE	Mary P	. Rankin	Mary	P. Rank	in				04-	08-97		
Signature, typed or printed name of registered agent and little if applicable (NO)						Registered Agent signature required				DATE		
12.	В	OFFICERS /	AND DIRECTOR		13.			T	ADDITIONS/CHANGES TO OFFIC			
TITLE	D	DE CABOLVII		☐ DELETE	1.1.70						hange	☐ Addition
NAME		RE, CAROLYN IT HOWARD ST.			1.2 N							
STREET ADDRESS	ı				1.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	LIVE OA	N FL		T7 bevere		TY - S1	1 - Z(P	ļ				
TITLE	•,	MIZINI		☐ DELETE	2.1 Ti				toot : 100K B		hange	Addition
NAME	JACK RA	HOWARD ST			2.2 N			(con	rect name is JOCK R	anrenj		
STREET ADDRESS	LIVE OA						ADDRESS	}				
CITY-ST-ZIP TITLE	D LIVE OA	N FL		DELETÉ	2. 4 C		T-ZIP	ļ		· · · · · · · · · · · · · · · · · · ·	hange	Addition
NAME	_	AN, SHARON L.		Dittit				ŀ			nange	MUDICION
STREET ADDRESS		HIO AVE			3.2 N		*DODEGG					
	LIVE OA						ADDRESS					
CITY-ST-ZIP TITLE	D			DELETE	411	HTY-S	N-ZIP			Пс	hange	Addition
NAME	_	T, VIVIAN			4.21			1			idigo	//Outron
STREET ADDRESS		OHIO AVE.			1		ADDRESS					
CITY-ST-ZIP	LIVE OA					TY-ST						
TITLE	V			DELETE	5.1 TI			U		<b>X</b> c	hange	Addition
NAME	MARIE L	EE			5.2 N			, ,	YMAN GARLAND		•	
STREET ADDRESS		HIO AVE					ADDRESS		19 S Ohio Avenue			
CITY-ST-ZIP	LIVE OA					TY - ST			ive Oak, FL 32060			
TITLE	P		<del></del>	DELETE	6.1 TI				THE PERSON		hange	Addition
NAME	HUNTER	, ARNOLD			6.2 N	AME						
STREET ADDRESS		HOWARD STREET	•		6.3 ST	REET	ADDRESS					
	INC ON							}				

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.