

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

FILED

Mar 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P06068 (1)
1. Corporation Name
THE NATAPOW REALTY CORPORATION

Principal Place of Business 2499 GLADES RD. STE 209 BOCA RATON FL 33431 US	Mailing Address 2499 GLADES RD. STE 209 BOCA RATON FL 33431 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/16/1985

4. FEI Number

16-0731630

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

STEINER, MICHAEL S.
616 E. ATLANTIC AVENUE
DELRAY BEACH FL 33444

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NATAPOW, STEPHEN D.	1.2 NAME	
STREET ADDRESS	120 CORPORATEWOODS 100	1.3 STREET ADDRESS	
CITY- ST- ZIP	ROCHESTER NY	1.4 CITY- ST- ZIP	
TITLE	S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WIEDMAN, FREDERICK JR.	2.2 NAME	
STREET ADDRESS	5 SOUTH FITZHUGH STREET	2.3 STREET ADDRESS	
CITY- ST- ZIP	ROCHESTER NY	2.4 CITY- ST- ZIP	
TITLE	AS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAZZANA, JAMES G. (ASST)	3.2 NAME	
STREET ADDRESS	5 SOUTH FITZHUGH STREET	3.3 STREET ADDRESS	
CITY- ST- ZIP	ROCHESTER NY	3.4 CITY- ST- ZIP	
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NATAPOW, ROBERT P.	4.2 NAME	
STREET ADDRESS	120 CORPORATEWOODS 100	4.3 STREET ADDRESS	
CITY- ST- ZIP	ROCHESTER NY	4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		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, checked, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0320039

CR2E034 (10/97)