PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P34089**

1. Corporation Name

WS REALTY, INC.

Principal Place of Business

4343 YACHT HARBOR DR

NAPLES LF 34112 US

Mailing Address

4343 YACHT HARBOR DR NAPLES FL 33962

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90028 036 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

					05/28/1991		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For
21 4 <i>D</i> 29	LIGHTH PUSE LN	26 4009 LIGHT	THOL	LSE LN	31-1326254	No	ot Applicable
Suite, Apt.		Suite, Apt. #, etc.			~5Certifcate of Status Desired ~		Additional
22 27					5Certificate of States Desired	Fee Re	equired
City & State City & State			. .		6. Election Campaign Financing	•	May Be
23 NAPLES, FL 28 NAPLES,			FL		Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cour		8. This corporation owes the current year		ш.,
24 34/1.	2 25	29 34/12	30	us_	Personal Property Tax.	[X -Yes	□No
	9. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New Registe	red Agent	
CT (CODDODATION SYSTEM			81 Name			
CT CORPORATION SYSTEM				82 Street Add	ress (P.O. Box Number is Not Acceptable)		
1200 S. PINE ISLAND ROAD							
PLAI	NTATION FL 33324			83			
			+	84 City		85 Zip	Code
						FL 📋 🗀	
office or r agent. I a	to the provisions of Sections 607.0503 registered agent, or both, in the State of amiliar with, and accept the obligations of the control of	of Florida. Such change was a	uthorized	by the corporate	poration submits this statement for the purpos on's board of directors. I hereby accept the a	e or changing its ppointment as re	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable (NOTE	: Registered /	Agent signature require	d when reinstating) DATE	E	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD	☐ DELETE	1 1 TITI	LE		☐ Change	Addition
NAME	HOOVER, R. LARRY		1.2 NA	ME			
STREET ADDRESS	41 SOUTH HIGH STREET		1.3 STF	REET ADORESS			
CITY-ST-ZIP	COLUMBUS OH 43215		1.4 CM	Y-ST-ZIP			
TITLE	S	☐ DELETE 2.1 TI		LE		☐ Change	Addition
NAME	LIEBERSBACH, JOHN		2.2 NA	ME			
STREET ADDRESS	A COURT HOLLOTOFFT		2.3 STF	REET ADDRESS			
CITY-ST-ZIP	COLUMBUS OH		2. 4 CI	TY-ST-ZIP			
TITLE	T	☐ DELETE	3.1 TIT	LE		Change	Addition Addition
NAME	VANFLEET, JOHN		3.2 NA	ME			
STREET ADDRESS	41 SOUTH HIGH STREET		3.3 STI	REET ADDRESS			
CITY-ST-ZIP	COLUMBUS OH		3.4. CI	ry-st-zi₽			
TITLE	V	☐ DELETE	4.1 TIT	LE		☐ Change	Addition
NAME	HANSON, SUSAN		4. 2 NA	ME			
STREET ADDRESS	41 SOUTH HIGH STREET		4.3 STI	REET ADDRESS			
CITY-ST-ZIP	COLUMBUS OH		4.4 CIT	Y-ST-ZIP			
TITLE	V			LE .		☐ Change	Additio
NAME	ISLER, DAVID F.		5.2 NA	ме			
STREET ADDRESS	AL COLUMN AND AND AND AND AND AND AND AND AND AN		5.3 ST	REET ADDRESS			
CITY-ST-ZIP	COLUMBUS OH 43215		5,4 CIT	Y-ST-ZIP			
TITLE	COLUMBOO OTT TOLIO	☐ DELETE	6.1 TIT	LE		☐ Change	Additio
NAME		_	6.2 NA	ме			
			6.3 ST	REET ADDRESS			
STREET ADDRESS				Y-ST-ZIP			
			0.7 011				

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.

SIGNATURE: _