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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P92000009374 (9)

ST. GEORGE ISLAND REALTY, INC.

cipal Place of Business	Mailing Address			
234 TIMBERLANE ROAD	1234 TIMBERLANE ROAD			
TALLAHASSEE FL 32312	TALLAHASSEE FL 32312			

FILED Apr 22 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing /	Address							III 16211 BIGI 1941	
1234 TIMBER		1234 TIMBERLANE ROAD									
TALLAHASSE	E FL 32312	TALLA	HASSEE FL 3231:	2			DO NOT WOITE	N THE O	חיטר		
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1							3. Date Incorporated or Qualified				
2 Principal Pi	lace of Business	2e Mailir	ng Address				12/03/1992 4. FEI Number			(Annuel of English	\dashv
	iaco di Busilless	<u></u> ⊢¬	ng Address						-	Applied For	_
Sulte, Apt.	# atc	Suite, Apt. #, etc.					59-3168522	Not Applicable S8.75 Additional			
22	π, σιο.	27					5. Certificate of Status Desired		•	D Additional Required	
City & State	е		& State				C Floring Committee Figure 1				\dashv
23	~	28			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees				
Zip	Country				·····			as paid the current year Intangible			
24	25	29		30			Personal Property Tax due June 3	_	ent year] Yes	niangible No	
	9, Name and Address of Currer		Agent	130			10. Name and Address of New Reg				
.10	HNSON, BEN				81	Name					-
	34 TIMBERLANE ROAD										
	LLAHASSEE FL 32312				82	Street Add	dress (P.O. Box Number is Not Acceptable	e)			
ļ '^	LLANASSEE FL 32312			ŀ	83						
					"						
ļ					84	City			85 2	Zip Code	
33 6	10	1007.460	A F. 11 A					<u>FL</u>	<u> Џ</u>		_
office or re	to the provisions of Sections 607,050 egi ste red agent, or both, in the State	i2 and 607.15€ of Florida, Sw	08, Florida Statui ch change was	ies, the at authorized	oove d bv	-named cor the corpora	poration submits this statement for the pustion's board of directors. I hereby accept	rpose of the appo	changir sintment	ig its registered as registered	;
agent. La	m familiar with, and accept the oblig	ations of, Secti	ion 607.Ŏ505, FI	orida Stat	utes.						
SIGNATURE		F1.1. F At of the case and the case									_
	Signature, typed or printed name of registered age OFFICERS AN				negA t	t signature requ	dired when reinstating)	DATE	OIDEO:	0000 11140	<u>ا</u> و
12.	DSTP	DURECTORS	DELETE	13. 1.1 TII	T1 C		ADDITIONS/CHANGES TO OFFICE	HS AND	Chan	·	_
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NAME	1234 TIMBERLANE ROAD			1.2 NA							3
STREET ADDRESS						ADDRESS					Ĭ
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NAME	PALMER, MORRIS			2.2 NA	ME						
STREET ADDRESS	1234 TIMBERLANE RD.			2.3 ST	REET A	ADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL 32312			2 4 0	ITY-SI	r-ziP		-			
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NAME				4. 2 N/	AME						
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NAME				5.2 NA	ME						
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NAME				6.2 NA							
STREET ADDRESS						DDRESS					
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CITY-ST-ZIP				6.4 CIT	11-51	- LIP					- 1

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.