

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000012281 (1)

1. Corporation Name

PENNINGTON REAL ESTATE, INC.

Principal Place of Business

132 GLENDALE DR.
LONGWOOD FL 32750

Mailing Address

132 GLENDALE DR.
LONGWOOD FL 32750-3951

3. Date Incorporated or Qualified

12/14/1992

3a. Date of Last Report

04/30/1996

4. FEI Number

20-2283944

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032

Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

PENNINGTON, ALFRED G
132 GLENDALE DR.
LONGWOOD FL 32750

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

12. OFFICERS AND DIRECTORS

TITLE D [] DELETE

NAME PENNINGTON, ALFRED G
STREET ADDRESS 132 GLENDALE DR.
CITY-ST-ZIP LONGWOOD FL 32750

TITLE D [] DELETE

NAME PENNINGTON, JANET W
STREET ADDRESS 132 GLENDALE DR.
CITY-ST-ZIP LONGWOOD FL 32750

TITLE [] DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

TITLE [] DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE [] Change [] Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE [] Change [] Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE [] Change [] Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE [] Change [] Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE [] Change [] Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE [] Change [] Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

000002510640

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***150.00

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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.