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

**PROFIT CORPORATION** ANNUAL REPORT

1998

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300000076 (8)

REAL ESTATE REFERRAL AND TRAINING CENTER, INC.

Principal Place of Business Mailing Address  1441 CREIGHTON ROAD C/O PENNY, F, HANSEN STE.A 3161 LAKE SUZANNE DR.						- i i anglidet bid imine eiter natur debit majit gatit natur	- 44611 BB1(1 18)	4:11 IAE1	
						1			
PENSACOLA FL 32504 CANTONMENT FL 32533 US US			32533			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						12/28/1992			
2. Principal	Place of Business	2a. Mailing Addres	ss			4. FEI Number	A	pplied For	
21		26	]			59-3163958	N	ot Applicable	
Suite, Apr	I. W, etc.	Suite, Apt. #, etc.						Additional	
22		27				5. Certificate of Status Desired		egulred	
City & Sta	nte .	City & State				6. Election Campaign Financing			
23		28				6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Co	untry					
24	25 29		<b>├</b> ─¬	2y		B. This corporation owes or has paid the cur     Personal Property Tax due June 30.		No No	
[4]	9. Name and Address of Curre		30	1		10. Name and Address of New Registered			
11		III Heğistered Ağetit	<u> </u>	81	Name	IV. Hame Bit Address of New Negistered	Agorn		
Hansen, Penny F 3161 Lake Suzanne dr.				"	INDITIO				
				62	Street Ad	ddress (P.O. Box Number is Not Acceptable)			
Si	TE A					,			
C	ANTONMENT FL 32533			63					
				84	City	FL	<b>85</b> Zip	Code	
44 0	4.0	00 4 007 4500 Fireday	04-4	<u> </u>					
office or	registered agent, or both, in the Stat	uz and 607.1508, Florida e of Florida. Such chang	i Statutes, the a e was authoriza	ad by	a-namea ci the coroo	orporation submits this statement for the purpose of oration's board of directors. I hereby accept the app	changing i xintment at	its registerea s reaistered	
agent I	am familiar with, and accept the oblig	pations of, Section 607.05	505, Florida Sta	atutes	3.				
SIGNATURE									
	Signature, typed or printed name of registered ag	and and title if applicable	(NOTE Register	ed Age	nt signature re	quired when reinstating) DATE			
12.				13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO		
TITLE	PVIS	☐ DELE	ETE 1.1 1	TITLE			Change	☐ Addition	
NAME	HANSEN, PENNY F		1.2 (	NAME	!				
STREET ADDRESS	3161 LAKE SUZANNE DR		139	CTREET	ADDRESS				
CITY-ST-ZIP	CANTONMENT FL 32533					•			
TITLE	DC	☐ DELE		1.4 CITY-ST-ZIF 2.1 TITLE			Change	Addition	
	HANSEN, PENNY F	LJ VELE					Crianile	L.J MOUNTAIN	
NAME	ALAL LAVE OUTLINE OD			NAME	1				
STREET ADDRESS			2.3 5	STREET	ADDRESS				
CITY-ST-21P	CANTONMENT FL 32533		1 2 4	CITY-S	T-21P	9+ <sup>1</sup>			

2.4 CITY-ST-ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE 4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

DELETE

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 eath; 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.

enny Hansen Henny Hansen

April 14, 1998 850-476-2154

Change

Change

Addition

Addition

☐ Addition

Addition

**FILED** 

Apr 27 1998 8:00am

Secretary of State

a tabunan ina tahah mini abiti abiti bani bani dalah abiti bati batik tabil biti bati