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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000012800 (7)

TOWN AND COUNTRY REALTY OF BLOUNTSTOWN, INC.

Principal Place 720 W. CENTI BLOUNTSTOW	g Address /. Central Avenue ntstown fl 32424-1912								
						3. Date Incorporated or Qualified 03/04/1993	3a. Date	of Last F	•
	2. Principal Place of Business 2e. Mailing Addr					4. FEI Number	Applied Far		
Suite, Apt.	#. etc.	26]	uite, Apt. #, etc.		····	59-3234884			lot Applicable Additional
22			7			5. Certificate of Status Desired			Additional lequired
City & Stat	o	F 3	ity & State			6. Election Campaign Financing		\$5.00	May Be
23 Ζίρ	Country	28	ip	Countr		Trust Fund Contribution			to Fees
24	25	29	'\''	30	у	This corporation has liability Ide Florida Statutes	intangible tax		s. 199.032,
	9. Name and Address of Curr		ed Agent	1991		10. Name and Address of New Ri			
	USE, JO B			81	Name				
720 W. CENTRAL AVENUE				82	Street Ac	et Address (P.O. Box Number is Not Acceptable)			· · · · · · · · · · · · · · · · · · ·
BLU	DUNTSTOWN FL 32424			83			-		
				<u></u>					
				84	City		FL ^l	35 Zip	Code
office or r agent. I a SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the obl	igations of, S	iection 607.0505, l	Florida Statute	S	orporation submits this statement for the ration's board of directors. I hereby acce	pt the appoint	anging i Imont as	ts registered
12.	OFFICERS A			13.		ADDITIONS/CHANGES TO OFFI		RECTO	RS IN 12
TITLE	P		DELETE	111111				Change	Addition
NAME	HOUSE, JO B. 720 W. CENTRAL AVE.			1.2 NAME					
STREET ADDRESS CITY-ST-ZIP	BLOUNTSTOWN FL				ADDRESS				
TITLE	<u>DECOMPONENT L</u>		DELETE	2.1 TRUE	51-711			Change	Addition
NAME				22 NAME				Ť	
STREET ADDRESS				2.3 STREE	1 ADDRESS				
CITY-ST-ZIP				2 4 CHY-	ST - 20/				
TITLE NAME			ET priete	3 1 TITLE 32 NAME			L!	Change	Addition
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP				3.4. CITY-					
TITLE			☐ DECLIE	4.1 TILLE				Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE			DELETE	4.4 GBY- 5.1 HILE	St · ZII'		— — П	Change	Addition
NAME				5.2 VAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				5.4 CITY-	ST - ZIP				
TITLE			☐ DELETE	61 THLE				Change	Addition
NAME STREET ADDRESS				6.2 NAME					

14. I do hereby certify that the information supplied with this filing does not qualify to information indicated on this annual report or supplemental annual report is true. I am an officer or director of the corporation or the receiver or trustee empowere appears in Block 12 or Block 13 if changed, or organ attachment with an addres

on stated in Section 119.07(3)(i), Florida Statutes. I further certify that the and that my signature shall have the same legal effect as if made under oath; that this report as required by Chapter 607, Florida Statutes; and that my name

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1004. 2868

FILED

Apr 28 1997 8:00am

Secretary of State