Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90161 045 ***158.75

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000018940

1. Corporation Name

KATHY BECKER REALTY, INC.

Principal Plac	e of Rusiness	Mailing Address			
2950 ALOMA A		2950 ALOMA AVE			
SUITE 303	vc	SUITE 303			
WINTER PARK	FL 32792	WINTER PARK FL 32792		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualifed	
				03/11/1993	_
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number Applied For	
21		26		59-3183670 Not Applicat	-
Suite, Apt.	Aloma Avenue	Suite, Apt. #, etc. 27 2020 A OM	12 Avenue	5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & Stat	er Pork, Fl	City & State Pa	VK, FL	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip	Country	Zip 20.000 —	Country 1 C	8. This corporation owes the current year Intangible	
24 321	42 25 US	29 3d 192 30	0.5	Personal Property Tax. Yes No	
				10. Name and Address of New Registered Agent	
101	EC EDEDEDICK W		81 Name		
JONES, FREDERICK W			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	\dashv
369 NORTH NEW YORK AVENUE					
	id floor Ter park fl 32789		83		
			84 City	FI 85 Zip Code	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligate	of Florida. Such change was autho	nzed by the corporatio	pration submits this statement for the purpose of changing its registered in a board of directors. I hereby accept the appointment as registered	a
SIGNATURE					1
01010110112	Signature, typed or printed name of registered agent		stered Agent signature required		
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addi	-
TITLE	D COVED WATHERINE C	☐ DELETE	1.1 TITLE		
NAME	BECKER, KATHERINE G		12 NAME		
STREET ADDRESS	2909 BANCHORY RD.		1.3 STREET ADDRESS		ĺ
CITY-ST-ZIP	WINTER PARK FL 32792	□ DELETE	1.4 CITY-ST-ZIP	☐ Change ☐ Addi	ition
TITLE		_	2.1 TITLE		
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	الماسمون المحاف في العالم المحافظة	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP 3.1 TITLE	☐ Change ☐ Addi	ition
TITLE		_	3.2 NAME		}
NAME		1	3.2 NAME 3.3 STREET ADDRESS		}
STREET ADDRESS			3.3 STREET ADDRESS		ł
CITY-ST-ZIP TITLE			4.1 TITLE	☐ Change ☐ Addi	ition
NAME		_	4. 2 NAME	2 0 1	Į
STREET ADDRESS		4	4.3 STREET ADORESS	·	ļ
			4.4 CITY-ST-ZIP		}
CITY-ST-ZIP TITLE			5.1 TITLE	☐ Change ☐ Addi	ition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP			5.4 CITY-ST-ZIP		ſ
TITLE			6.1 TITLE	☐ Change ☐ Addi	ition
NAME			6.2 NAME		-
STREET ADDRESS		1	6.3 STREET ADDRESS		1

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 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: