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

Mailing Address 6584 POPLAR AVE

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

6584 POPLAR AVE



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000039723 (0)

AMERICA FIRST FLORIDA REIT, INC.

**STE 340** STF 340 MEMPHIS TN 38138 DO NOT WRITE IN THIS SPACE MEMPHIS TN 38138 3. Date Incorporated or Qualified 05/27/1993 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 47-0769593 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State **\$5.00** May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zip Country Country 8. This corporation owes or has paid the current year Intangible No. Yes 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent C T CORPORATION SYSTEM 8751 WEST BROWARD BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PCD Addition TITLE DELETE 1.1 TITLE Change CATES, GEORGE E NAME 1.2 NAME 6584 POPLAR AVE, STE 340 STREET ADDRESS 1.3 STREET ADDRESS MEMPHIS TN CITY-ST-ZIP 1.4 CITY - ST - ZIP DFLETE Change Addition TITLE 2.1 TITLE WADSWORTH, SIMON R.C. NAME 2.2 NAME 6584 POPLAR AVE, STE 340 STREET ADDRESS 2.3 STREET ADDRESS **MEMPHIS TN** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition Change TITLE 3.1 TITLE JOHNSON, LYNN A. MARK S. MARTINI NAME 3.2 NAME 6584 POPLAR ANE STE 840 6584 POPLAR AVE. STE 340 STREET ADDRESS 3.3 STREET ADDRESS **MEMPHIS TN** MEMPHIE TN 38138 3 4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE SCHOLL, LINDA D. NAME 4.2 NAME 1755 KIRBY PARKWAY, STE 100 4.3 STREET ADDRESS STREET ADDRESS MEMPHIS TN 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.9 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 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.

SIGNATURE: Mad

26/98

901682-6600

FILED

Mar 30 1998 8:00am

Secretary of State