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Apr 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # **P93000045880 (0)**

1. Corporation Name
PINE STREET PROPERTIES, INC.

Principal Place of Business	Mailing Address
200 E. ROBINSON STR. SUITE 290 ORLANDO FL 32801 US	200 E ROBIINSON ST. SUITE 290 ORLANDO FL 32801 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 10405 THOMPSON PL.
Suite, Apt. #, etc
22
City & State
23 CLERMONT FL.
Zip 24 34711 Country 25 USA

2a. Mailing Address
26 10405 THOMPSON PL.
Suite, Apt. #, etc
27
City & State
28 CLERMONT FL.
Zip 29 34711 Country 30 USA

3. Date Incorporated or Qualified
06/23/1993

4. FEI Number
59-3193109
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
PHILLIPS, R P
200 N. THORNTON AVE.
ORLANDO FL 32801-2164

10. Name and Address of New Registered Agent
81 Name BYRON N. CARTER
82 Street Address (P.O. Box Number is Not Acceptable) 10405 THOMPSON PL.
83
84 City CLERMONT **FL** 85 Zip Code 34711

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 Byron N. Carter 4/7/98
Signature, typed or printed name of individual with authority to sign (NOTE: Registered Agent signature required when reinstating) Date

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	CARTER, BYRON N		1.2 NAME		
STREET ADDRESS	200 E ROBINSON ST., SUITE 290		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

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.

Byron N. Carter 4/7/98