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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000050916 (4)

COMMERCIALFIRST PROPERTIES, INC.

Principal Place of Business Mailing Ac		Mailing Address	ddress		- I HERKIDEK IND NOVOR TYYN MANY DONN DONN DONN BOINK BUINK KRYRL YNDIN DILYK YDDIN	
330 E. CENTRAL BLVD. 330 E. CE		330 E. CENTRAL BLVD.	ENTRAL BLVD.			
SUITE 100		SUITE 100		DO NOT INDITE IN THIS SPACE		
ORLANDO FL 32801 US		ORLANDO FL 32901 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
**		00			07/15/1993	
2. Principal P	Place of Business	2a, Mailing Address			4. FEI Number	Applied For
21		26		59-3196266	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23	28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	,	8. This corporation owes or has paid the curren	· _ ~
24	25		30			Yes No
9, Name and Address of Current Registered Agent				Name	10. Name and Address of New Registered Ag	ent
	KEEVER, MATTHEW T		81	Name		
330 E. CENTRAL BLVD. SUITE 100 ORLANDO FL 32801				82 Street Address (P.O. Box Number is Not Acceptable)		
			83	83		
Vni	LANDO FL 32001			Oh.		1 =/- /
		· · · · · · · · · · · · · · · · · · ·	84			85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes of Florida, Such change was au	s, the above	e-named corp	poration submits this statement for the purpose of clinion's board of directors. I hereby accept the appoin	nanging its registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flori	da Statute). S.	months board of directors. I horoby docupt the appear	Milipul de registered
SIGNATURE	Signature, typed or printed name of registered agen	Land title if speciaphia (NOTE:	Posintored Age	of signal-us capulit	red when reinstating) DATE	
12.	OFFICERS AND	- 	13.	IT SIGNATURE LECTOR	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			Change Addition
NAME	SWEENEY, JEFFREY S		1.2 NAME			
STREET ADDRESS	A A A A A A A A A A A A A A A A A A A		1.3 STREET	ADDRESS		
CITY-ST-ZIP	ANI ANIDA EL AGRAD		1.4 CITY - S	T-ZIP		
TITLE	Ō	DELETE	2.1 TITLE			Change Addition
NAME	MCKEEVER, MATTHEW T		2.2 NAME			
STREET ADDRESS	361 E KINGS WAY		2.3 STREET	ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		2. 4 CITY-1	IT-ZIP		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY - S	T-21P		
TITLE		☐ DELET E	4.1 TITLE		L.	Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S	r-zip		· • • • • • • • • • • • • • • • • • • •
TITLE		☐ DELETE	5.1 TITLE		L.	Change
NAME			5.2 NAME			
STREET ADDRESS				ADDRESS		
			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S			
TITLE	_ <u></u>	DELETE	5.4 CITY-S 6.1 TITLE			Change Addition
TITLE		DELETE	5.4 CITY-S	r- ZIP		Change Addition

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.

FILED

Feb 19 1998 8:00am

Secretary of State