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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000079983 (1)

GULFSTREAM INTERCOASTAL REALTY, INC.

FILED Apr 24 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								1 EDDIEDOL ALD LOLDO ALPEL DOLLA DOL	-!! 00 !!! !D #! 0 !B!! 0 ! 0 ! 0 ! ! 0 !	
950 N. COURTÉNAY PKWY. STE. A-11 MERRITT ISLAND FL 32953 US					953			DO NOT WRITE IN THIS SPACE		
US								3. Date Incorporated or Qualified		
6 Driesinal D	look of Duck		T-6-	Mailing Address				11/19/1993 4. FEI Number	- TAS	nlied For
2. Principal Place of Business				2a. Mailing Address 26				<u> </u>	├	plied For 1 Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				59-3226053	60.75	
22				27			,	5. Certificate of Status Desired	Fee Re	quired
City & State				City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zip Country			28							
24	. ·			29 30				8. This corporation owes or has paid the currept year Intangible Personal Property Tax due June 30. Yes No		
9. Name and Address of Current				l				10. Name and Address of New Registered Agent		
н						81	Name			
HOLMES, ALAN 950 N. COURTENAY PKWY						82	Street	ddress (P.O. Box Number is Not Acceptable)		
	Ji të a11 E rri tt islj				83		***************************************			
						84	City		FL 85 Zip C	Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the								corporation submits this statement for the pu		s registered
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 hence of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE										
12. OFFICERS AND							rk signa.ure	ADDITIONS/CHANGES TO OFFICE		S IN 12
TITLE	D	CA FIGURE	11 127 131112.	DELETE	1.1 T	ITLE			Change	Addition
NAME	HOLME	S, ALAN		1.21		IAME				
STREET ADDRESS 950 N. COURTENAY PKWY, S				11A 1.3 S		1.3 STREET ADDRESS				
CITY-ST-ZIP		TT ISLAND FL 3295	-		1.4 0	ITY-S	1 - 2IP			
TITLE	D			DELETE	2.1 7	ITLE			☐ Change	Addition
NAME	HOLME	S, SHIRLEY			2.2 N	AME				
STREET ADDRESS	STREET ADDRESS 950 N. COURTENAY PKWY, S			A	2.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	MERRIT	IT ISLAND FL 3295	3		2.40	CITY-5	31 - ZIP			
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TITLE				☐ DELETE	6.1 1				L Change	Addition
NAME					•	AME				
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP		_ i_i	Luith thic	films does not availe.		ITY-S		ed in Section 119.07(3)(i) Florida Statutes I f	further certify that the	information

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further ceriny may 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.