## 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 #

P93000082741 (8)

## FILED May 01 1998 8:00am Secretary of State

BUSH REALTY, INC.	
Principal Place of Business Mailing Address	
1020 W INTERNATIONAL SPEEDWAY BLVD P O BOX 214759	
DÂYTONA BEACH FL 32114 S DAYTONA FL 32121 DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified	
11/24/1993	
	Applied For
Suite Ant # etc Suite Ant # etc	Not Applicable  Additional
E Certificate of Status Desired	Required
City & State   6 Election Campaign Financing \$5.0	0 May Be
28 Trust Fund Contribution Adde	d to Fees
Zip Country Zip Country 8, This corporation owes or has paid the current year 25 29 30 Personal Property Tax due June 30. Yes	Intangible ☑ No <b>N</b> A
24 25 29 30 Personal Property Tax due June 30. Yes  2 Name and Address of Current Registered Agent  10 Name and Address of New Registered Agent	LI NO MA
BUSH, WILLIAM D JR. 81 Name	
3601 \$. ATLANTIC AVE.  82 Street Address (P.O. Box Number is Not Acceptable)	
DAYTONA BEACH SHORES FL 32127	
) B3	
84 City FL 85 Zi	p 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	as registered
SIGNATURE	
Signature, typed or product name of registered agent and to all applicable (NOTE Registered Agent signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR CHANGES TO OFFICERS AND D	
NAME BUSH, WILLIAM D JR. 12 NAME	E MOUNTON
STREET ADDRESS 3601 S. ATLANTIC AVE.	1
DAYTONA BEACH SHORES FL 32127 1.4 CITY-ST-ZIP	
TITLE DELETE 2.1 TITLE Chang	e Addition
NAME 22 NAME	
STREET ADDRESS 2.3 STREET ADDRESS	
CITY-ST-ZIP	e
TITLE DELETE 3.1 TITLE Chang	, Madiball
STREET ADDRESS 3.3 STREET ADDRES	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	
TITLE DELETE 4.1 TITLE Chang	B Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-ZIP 4.4 CITY-ST-ZIP	Addition
TITLE DELETE 5.1 TITLE Chang	e L. Addition
NAME 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	J
TITLE DELETE 6.1 TITLE Chang	I
	e
NAME 62 NAME	e
NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS	e

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 chapter, or on an attachment with an address.

CIONATURE.

Dr.

April 23.199

760-6111