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 #

1. Corporation Name

H. RICE REALTY INC. P94000034943 (8)

FILED Apr 13 1998 8:00am Secretary of State

3-31-98

n. nio	e nealtt, inc.			1841/41/10 (11) 110/10/10/10	
Principal Place	e of Business	Mailing Address		3 (BOURHA) USB (BRIK BINN) BOULD BOKEN BOUND OFFICE	INNER THE PROPERTY OF THE PROP
1109 SOUTH CONGRESS AVE. 1109 SOUTH CONGRESS AVE.					
W PALM BEACH FL 33406 W PALM BEACH FL 33406				1	
				DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified 05/01/1994	
2 Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 304			ngre SS	65-0484793	Not Applicable
Suite, Apt. #, etc Suite, Apt. #, etc.			Mare		\$8.75 Additional
22	B	27 B		5. Certificate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing \$5.00 May Be	
23 Lake 1	Worth FL	28 Lake Worth	FL	Trust Fund Contribution	Added to Fees
_ Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24 3346			30 V S	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	i Hegistered Agent	81 Name	10. Name and Address of New Registere	a Agent
	END, JOHN M		Name		
1109 SOUTH CONGRESS AVE. W PALM BEACH FL 33406			82 Street Add	fress (P.O. Box Number is Not Acceptable)	
yv	PALM DEACH PL 33400		83		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statute	es, the above-named cor	poration submits this statement for the purpose	
agent. I a	egistered agent, or both, in the State im familiar with, and accept the obligation in the control of the cont	of Florida, Such change was a itions of, Section 607.0505, Flo	uthorized by the corpora rida Statutes.	ation's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE	Signature, typed or printed name of registered age	of and life if applicable. (NOTE	Registered Agent signature requ	ired when reinstating) DATE	
12.	OFFICERS AN	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 TITLE		Change Addition
NAME	RICE, HERBERT S JR		1.2 NAME		
STREET ADDRESS	1109 S. CONGRESS AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BEACH FL 33406		1.4 CITY-ST-ZIP	<u> </u>	
TITLE	TS COUNTY	DELETE	2.1 TITLE		Change Addition
NAME	YEEND, JOHN 1109 SOUTH CONGRESS AV	rc .	2 2 NAME		
STREET ADDRESS	WEST PALM BEACH FL 3340		2 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	WEST FALM BEAUTI FL 3340	DELETE	2 4 CITY-ST-ZIP 3 1 TITLE		Change Addition
NAME		FT ottill	3.2 NAME		The properties
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		
TETLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CHY-ST-ZIP	<u></u>		6.4 CITY-ST-ZIP		
14. I hereby of	certify that the information supplied won this annual report or supplements	th this filing does not qualify for I annual report is true and accura-	r the exemption stated in	n Section 119.07(3)(i), Florida Statutes. I further ure shall have the same legal effect as if made.	certify that the information under path; that I am an
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. I hereby c indicated officer or	on this annual report or supplements	ith this tiling does not qualify to il annual report is true and accu piver or truslee empowered to e	64 CITY-ST-ZIP 61 TIFLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP r the exemption stated in urate and that my signal	n Section 119.07(3)(i), Florida Statutes. I further ure shall have the same legal effect as if made quired by Chapter 607, Florida Statutes; and the	certify that the information under oath; that I am a