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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400036742 (2)

LAKE SILVER SCHOOL OF REAL ESTATE, INC.

Mailing Address Principal Place of Business

FILED Mar 09 1998 8:00am Secretary of State



| BS7 OVERSPIN DR WINTER PARK FL 32789 | | | 857 OVERSPIN DR WINTER PARK FL 32789 | | | DO NOT MIDITE IN THE | ebace | |
|--|---|---------------------------------------|---|------------|-----------------|---|------------|---------------|
| | | | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified | | |
| 1 | | | | | | 05/16/1994 | | |
| 2. Principal P | lace of Business | 2a. Mailing Ad | 2a. Mailing Address | | | 4. FEI Number | IAt | oplied For |
| 21 | | 26 | 26 | | | 59-3245754 | <u>-</u> | ot Applicable |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | | Additional |
| 22 | | 27 | | | | 5. Certificate of Status Desired Fee Required | | |
| City & State | | 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 cur | | |
| 24 | 26 | 29 | | | | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent | | |
| 9, Name and Address of Current Registered Agent 81 | | | | | | 10. Name and Address of New Registered | Agent | |
| KWASTEL, BERNARD | | | | | Name | | | |
| | OVERSPIN DR | | | 82 | Street A | Address (P.O. Box Number is Not Acceptable) | | |
| į Win | ITER PARK FL 32789 | | | 63 | | | | |
| | | | | 03 | | | | <u> </u> |
| | | | | 84 | City | FL | 85 Zip | Code |
| 1 I | | | | | | | | |
| 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 hoth, 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 name of reg | petered agent and lifte if applicable | (NOTE: Boais | lered Ape | ent signature r | required when reinstating) DATE | | |
| 12. | | LRS AND DIRECTORS | | 3. | | ADDITIONS/CHANGES TO OFFICERS AND | DIRECTOR | IS IN 12 |
| TITLE | P | | DELETE 1. | .1 TITLE | T | 110000000000000000000000000000000000000 | Change | Addition |
| NAME | KWASTEL, LINDA M | | 1. | 2 NAME | j | | | ì |
| STREET ADDRESS | 657 OVERSPIN DR | | 1. | 3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | WINTER PARK FL 3270 | 89 | 1. | 4 City-S | T-ZIP | | | |
| TITLE | ٧ | | DELETE 2 | 1 THLE | | | Change | Addition |
| NAME | KWASTEL, BERNARD | | 2. | .2 NAME | - | | | l |
| STREET ADDRESS | 657 Overspin dr | | 2. | 3 STREET | ADDRESS | | |] |
| CITY - ST - ZIP | WINTER PARK FL 327 | | | 4 CITY - | ST - 21P | | | |
| TITLE | ST DELETE | | | .1 TITLE | | | Change | Addition |
| NAME | ROTH, ROBERT H | | 1 | 2 NAME | 1 | | | |
| STREET ADDRESS | P O BOX 976 N/A | | | | ADDRESS | | | Į |
| CITY-ST-ZIP | ORLANDO FL 32802 | | | 4. COY-5 | ST-ZIP | | [] () | |
| TITLE | | LJ | | .1 TITLE |] | | Change | Addition |
| NAME | | | | . 2 NAME | 1 | | | |
| STREET ADDRESS | | | | | ADDRESS | | | l |
| CITY-ST-ZIP | | | | 4 CITY - S | T- 21P | | Change | ☐ Addition |
| TITLE | | السا | | 1 TITLE | } | | | LLI AUGIIION |
| NAME ATORES ADDRESS | | | | 2 NAME | 400DCCC | | | |
| STREET ADDRESS | | | 1 | | ADDRESS | | | |
| CITY+ST-ZIP | | | | 4 CITY - S | 1 - ZIP | | Change | Addition |
| TITLE | | السا | | | Į | | T nigirile | - Addition |
| NAME DEDECT ADDRESS | • | | | 2 NAME | ADDRESS | | | 1 |
| STREET ADDRESS | | | | | ADDRESS | | | ĺ |
| CITY-ST-ZIP | | | ■ 6. | 4 CITY - S | 1-Z(P | | | |

14. Thereby 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 is rule 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 convertainment of 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 changes or on an attachment with an address.

SIGNATURE:

407-647-5733