## 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 # P9400040075 (1)

ALL PRO REALTY CO. VOLUSIA COUNTY, INC.

**FILED** Jan 28 1998 8:00am Secretary of State

Principal Place of Business Mailing Address								FIGURIARE I LES TORAS DEST		II MEHL MARI 31	ONE MANY TO BE
2	701 S. RIDO	GEWOOD AVE.		2701 S. RIDGEWOOI	2701 S. RIDGEWOOD AVE.						
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`	SO. DATION	IA FL 32119		SO. DAYTONA FL 32119			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
								05/23/1994	iu		
2. Principal Place of Business 2a. Mailing Address								4, FEI Number		1 1	pplied For
21	· ·			26			59-3246194		<del></del>	lot Applicable	
	Suite. Apt. #, etc.			Suite, Apt. #, etc.						Additional	
22	12			27			5. Certificate of Status Desired	. 🗆	,	Required	
	City & State			City & State			6. Election Campaign Financing	3	\$5.00	May Be	
23				28			Trust Fund Contribution			to Fees	
<u> </u>	Zip					untry	/	8. This corporation owes or has			
24								Personal Property Tax due Ju			No
g. Name and Address of Current Registered Agent								10. Name and Address of New	Registered	Agent	
		EMMLER, G			81 N						
5768 SWEETWATER BLVD					82	Street Adda	ress (P.O. Box Number is Not Accep	itable)			
PORT ORANGE FL 32127						83					
Ì						03					
						84	City	y 14	y 1	85 Zip	Code
<u> </u>	Description	4- N	007.050	2 CO7 1500 Florida C					FL	.	
נו	office or a	registered ag	ent, or both, in the State	of Florida, Such change v	ed py	e-named corp y the corporat	tion's board of directors. I hereby ac	e purpose o cept the app	ointment as	is 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 region 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											1
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE											
12. OFFICERS AND DIRECTORS 13.							ar signature requi	ADDITIONS/CHANGES TO OF		DIRECTO	BS IN 12
TIT		D		DELETE 1.1 T.				PARTITION OF STANCE OF STANCE	, 102,10744	Change	Addition
NA			OMERY, HELENA W	1.2 N		NAME					]
STO	OTTILES		DGE DR		1.3 ST		ADDRESS				
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STE	0111211112011200		/EETWATER BLVD	2.3 \$7		2.3 STREET ADDRESS					
CIT	CITY-ST-ZIP PORT		RANGE FL 32127			2. 4 CITY-ST-ZIP					[
TIT	TITLE D			DELETE	3.1	TITLE				Change	Addition
NA			RD, ROBERT M		3.2	NAME					
\$TF	STREET ADDRESS 250 COQUINA			3.3 ST		STREET	ADDRESS				
0111-33-21		ORMON	D BEACH FL 32174				ST-ZIP				
TIM	LE			☐ DELETE	4.1	TITLE				☐ Change	☐ Addition
NA	ME				4. 2	NAME					
STE	ieet address				4.3	STREET	ADDRESS				
CITY-ST-ZIP				T 6.7		CITY-S	T-ZiP			[ ] o:	[m] 1 ins
TITLE				☐ DELETE		5.1 TITLE				☐ Change	L Addition
NA						MAME					
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TIT				☐ DELETE		ITLE	İ			Change	☐ Addition
NAI					- 8	IAME					
	REET ADDRESS						ADDRESS				
	Y-ST-ZIP	portifu that the	inform <b>a</b> ion eventied wit	h this filing does not out		HTY-S		Section 119.07(3)(i), Florida Statutes	I further oc	rtify that the	information
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