

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 30 1997 8:00am
Secretary of State

DOCUMENT # P94000048961 (4)

1. Corporation Name

BEST CHOICE REALTY, INC.



Principal Place of Business

5527 RAINBOW LN
CRESTVIEW FL 32536

Mailing Address

5527 RAINBOW LN
CRESTVIEW FL 32539-9557

2. Principal Place of Business

21 5170 South Fardon Blvd
Suite, Apt. #, etc.

2a. Mailing Address

26 5170 South Fardon Blvd
Suite, Apt. #, etc.

City & State

23 Crestview FL

City & State

28 Crestview, FL

Zip

24 32536

Country

25 OKALOOSA

Zip

29 32536

Country

30 OKALOOSA

9. Name and Address of Current Registered Agent

KELLEY, PAUL T
5527 RAINBOW LN
CRESTVIEW FL 32536

3. Date Incorporated or Qualified

06/27/1994

3a. Date of Last Report

02/20/1996

4. FCI Number

59-3259270

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☒ No ☐

10. Name and Address of New Registered Agent

B1 Name

Kelley, PAUL T.

B2 Street Address (P.O. Box Number is Not Acceptable)

2202 North Pearl St.

B3

B4 City

Crestview

FL

B5 Zip Code

32536

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

Paul T. Kelley

PAUL T. Kelley

April 24, 1997

Signature, typed or printed name of registered agent acceptable if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

KELLEY, PAUL T

STREET ADDRESS

5527 RAINBOW LN

CITY-ST-ZIP

CRESTVIEW FL 32539

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PUTS

1.2 NAME

Kelley, PAUL T.

1.3 STREET ADDRESS

2202 N. Pearl St.

1.4 CITY-ST-ZIP

crestview FL 32536

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby 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 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.

SIGNATURE:

Paul T. Kelley

April 24, 1997

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CR2E034 (9/96)