


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

FILED  
Apr 29, 1999 8:00 am  
Secretary of State

04-29-1999 90268 008 \*\*\*150.00

0487708

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # P94000049069

1. Corporation Name

THE PEREGRINE REALTY GROUP, CORPORATION



Principal Place of Business 20717 CHESTNUT ST. DUNNELLO FL 34431	Mailing Address 20717 CHESTNUT ST. DUNNELLO FL 34431
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 11801 SW 180 <sup>th</sup> AVE. Suite, Apt. #, etc. 22 City & State 23 DUNNELLO, FL. Zip 24 34432 Country 25 USA		2a. Mailing Address 26 11801 SW 180 <sup>th</sup> AVE Suite, Apt. #, etc. 27 City & State 28 DUNNELLO, FL. Zip 29 34432 Country 30 USA		3. Date Incorporated or Qualified 06/27/1994	
		4. FEI Number 59-3255023		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent

MCPHILLIPS, RICKY D  
20717 CHESTNUT ST.  
DUNNELLO FL 34431

10. Name and Address of New Registered Agent

81 Name	MCPHILLIPS, RICKY D.
82 Street Address (P.O. Box Number is Not Acceptable)	11801 SW 180 <sup>th</sup> AVE.
83	
84 City	DUNNELLO
85 Zip Code	FL 34432

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

RICKY D. MCPHILLIPS

(NOTE: Registered Agent signature required when resigning)

DATE

4-26-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDST	1.1 TITLE	PDST
NAME	MCPHILLIPS, RICKY D	1.2 NAME	MCPHILLIPS, RICKY D.
STREET ADDRESS	20717 CHESTNUT ST	1.3 STREET ADDRESS	11801 SW 180 <sup>th</sup> AVE
CITY-ST-ZIP	DUNNELLO FL 34431	1.4 CITY-ST-ZIP	DUNNELLO, FL. 34432
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE:

RICKY D. MCPHILLIPS

4-26-99

Date

(352) 266-9159

Daytime Phone #

CR2E034 (11/98)