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

P94000061769 (3)

GM REALTY I, INC.

Principal Place of Business	
2753 STATE ROAD 580	

2753 STATE ROAD 580 SUITE 105C CLEARWATER FL 34621

2. Principal Place of Business

Mailing Address

2753 STATE ROAD 580 SUITE 105C CLEARWATER FL 34621

2a. Mailing Address

FILED May 18 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

 Date Incorporated or Qualified 08/22/1994

4. FEI Number

21		26				59-3265069		No	ot Applicable
Suite, Apt	#, etc.		Apt # etc			5. Certificate of Status Desired		\$8.75	
22		27						Fee Re	equired
City & State	e	City &	State			6. Election Campaign Financing	Pro-Cl		Мау Ве
23		28				Trust Fund Contribution		Added	
Zip	Country	Ζφ		Countr	У	B. This corporation owes or has j			- ~ 1
24	25	29 Pagistared 6		30		Personal Property Tax due Jui 10. Name and Address of New I			J No
	g. Name and Address of Current Registered Agent			81	Name		109istered	Agent	
	ORDANO, MICHAEL B				Hame	·			
2753 STATE ROAD 580 SUITE 105C			82	82 Street Address (P.O. Box Number is Not Acceptable)					
			87	83					
CL	EARWATER FL 34621			i	7				į
				84	City		FL	85 Zip (Code
dd Purgunat	to the provisions of Sections 607.0603	and 607 1509	L Elorida Statut	oc the oper	n named	d corporation submits this statement for the		t abanaina it	lo registered
office or r	egistered agent, or both, in the State of	of Florida Suc	h change was a	authorized b	y the cor	rporation's board of directors. I hereby acc	ept the app	ointment as	registered
agent. I a	m familiar with, and accept the obligat	ions of, Section	on 607.0505, Flo	orida Statute	:S)
SIGNATURE	Signature, typed or printed name of registered agent			C Designed A		re required when reinstating)	DATE		
12.	OFFICERS AND		ile (NO.	13.	ent signature	ADDITIONS/CHANGES TO OFF		DIRECTOR	RS INI 12
TITLE	D		DELETE	1.1 T TLE		TABINION OF WINDED TO BIT	102/10/11/0	Change	Addition
NAME	GIORDANO, MICHAEL		_	1.2 NAME				_ ,	{
STREET ADDRESS	17 BAHAMA CIR.				T ADDRESS				
CITY-ST-ZIP	TAMPA FL 33606			1.4 CITY-					ł
TITLE	D		DELETE	2.1 TITLE	31-2IF	 		Change	Addition
NAME	MOONEY, BERT E			2.2 NAME					
STREET ADDRESS	2787 SABAL SPRINGS CIRCLE	.1.204			T ADDRESS				ĺ
CITY-ST-ZIP	CLEARWATER FL 34621	. 0 201		2.4 OITY					
TITLE	020 01111111111111111111111111111111111		DELETE	3 1 717 LE	<u> </u>			Change	Addition
NAME			_	3 2 NAME				_ ,	_
STREET ADDRESS					T ADDRESS				1
CITY-\$T-ZIP				3.4. CITY-					
TITLE			DELETE	41 TILE	31 EII			Change	Addition
NAME				4. 2 NAME					_
STREET ADDRESS					t address				
CITY-ST-ZIP				4.4 CITY					
TITLE			DELETE	5.1 flitE	01 ZX			Change	Addition
NAME				5.2 NAME				- '	_
STREET ADDRESS					T ADDRESS				{
CITY-ST-ZIP				5 4 CITY					ļ
TITLE			DELETE	6.1 TITLE	S - 164	 		Change	Addition
NAME	1			6.2 NAME				-	
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP				6 4 CITY					
14. I hereby o	certify that the information supplied with	h this filing do	es not qualify for	or the exemp	otion state	ted in Section 119.07(3)(i), Florida Statutes	I further ce	ertify that the	information
indicated	on this annual report or supplemental	annual report	is true and acc	curate and th	nat my sig	gnature shall have the same legal effect as	s if made un	ider oath, the	at⊦am an I
Block 12	or Block 13 if changed, or on an attact	nment with as	address	execute (nis	rahoir a:	is required by Chapter 607, Florida Statute	s and matt	пу патне ар	реатъті