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Apr 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000067533 (7)

1. Corporation Name

GAR REALTY AND PROPERTY MANAGEMENT, INC.

Principal Place of Business

103 WEST OAK STREET
SUITE C-4
KISSIMMEE FL 34741

Mailing Address

103 WEST OAK STREET
SUITE C-4
KISSIMMEE FL 34741-4472

3. Date Incorporated or Qualified

09/14/1994

3a. Date of Last Report

10/09/1996

2. Principal Place of Business

21 103 West Oak St.

2a. Mailing Address

26 103 West Oak St.

4. FEI Number

59-3267809

Applied For

Not Applicable

Suite, Apt. #, etc.

22 Ste C-4

Suite, Apt. #, etc.

27 Ste C-4

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 KISSIMMEE FL

City & State

28 KISSIMMEE FL

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Zip

24 34741

Country

25 USA

Zip

29 34741

Country

30 U.S.A

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

RIVELLO, GERARD A
103 WEST OAK STREET
SUITE C-4
KISSIMMEE FL 34741

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
DPS
RIVELLO, GERARD A
STREET ADDRESS
103 WEST OAK ST SUITE C-4
CITY-ST-ZIP
KISSIMMEE FL

TITLE ☐ DELETE

NAME
VT
RIVELLO, HILARY M
STREET ADDRESS
103 EST OAK ST SUITE C-4
CITY-ST-ZIP
KISSIMMEE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-3-97

407-933-1110

CR2E034 (9/96)