May 01, 1999 8:00 am Secretary of State

05-01-1999 90083 047 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000074816

1. Corporation Name

TROPICAL APPRAISAL CORPORATION

Principal Place of Business Mailing Address					. (##it##i tim imit) Atmit mmit matt matt matt	CERT STEEL SECENTIFIES BUN CERT
5335 NW 49TH CT 5335 NW 49TH CT					•	
COCONUT CREEK FL 33073 COCONUT CREEK FL 33073					DO MOT MIDITE IN THIS	00405
US US					DO NOT WRITE IN THIS	SPACE
	•				3. Date Incorporated or Qualifed 10/12/1994	
2. Principal Pl	ace of Business	2a. Mailing Address		·	4.,,FEI Number	- Applied For
21		26			65-0539779	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8,75 Additional Fee Required
22 27 27						
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23 28			Country		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year In	tangible ☐ Yes X No
24	25	29 30	01		Personal Property Tax. 10. Name and Address of New Registered	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Registered	Agent
	B, SCOTT		82		Address (P.O. Box Number is Not Acceptable)	
	NW 49TH CT ONUT CREEK FL 33073		83			
		•	84	City		85 Zip Code
					FL	- \$
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was auti	norizea ov	tne como	corporation submits this statement for the purpose of pration's board of directors. I hereby accept the appointment of the purpose of the pur	changing its registered intment as registered
SIGNATURE		annenigeran i Areea i				
	Signature, typed or printed name of registered agent			t signature re	equired when reinstating) DATE	
12	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	P WEDD COOTE	- ···		1	VIEW PRUSIDENT	Citatige Managem
NAME	WEBB, SCOTT		1.2 NAME		NANETTE WEBB	
STREET ADDRESS	COCONIT OPER PL 20072		1.3 STREET	1		3 3073
CITY-ST-ZIP			1.4 CITY-S	Γ-ZIP i	COCONUT CREEK, 1-1	Change Addition
TITLE	VP	DELETE	2.1 TITLE			Change
NAME	(1122, 10011		2.2 NAME		· ·	. (
STREET ADDRESS	CITABILED COUNTY, TO, TTO		2.3 STREET	}		·
CITY-ST-ZIP			2.4 CITY-S	T-ZIP_		Change Addition
TITLE			3.1 TITLE	\		Unango
NAME			3.2 NAME			:
STREET ADDRESS			3.3 STREET	Į	·	
CTY-ST-ZIP	Constant		3.4. CITY- S	T-ZIP		☐ Change ☐ Addition
TITLE	•	☐ DELETE	4.1 TITLE			Change Addition
NAME			4, 2 NAME	į	-	
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	·	Change DAddis-
TITLE	· .	☐ DELETE	5.1 TITLE	1	•	☐ Change ☐ Addition
NAME ·			5.2 NAME			. *
STREET ADDRESS			5.3 \$TREET	- 1		
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TITLE	the transfer of the second	☐ DELETE	6.1 TITLE			☐ Change ☐ Addition

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 of rustee 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 address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

SPANNING KECSUSTILLE WV1313

JRE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4/23/99 954574 0632 Date Dayline Phone #

CR2E034 (11/98)