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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000076119 (4)

KAYLOR & BRENNY REAL ESTATE, INC.

Principal Place of Business Mailing Address 31608 US HWY 19 N 31608 US HWY 19 N PALM HARBOR FL 34685 PALM HARBOR FL 34685 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/14/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3274241 21 Not Applicable Suite. Apt. #. etc Suite Ant. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zio Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KAYLOR, PATRICK 31608 US HWY 19 N 82 Street Address (P.O. Box Number is Not Acceptable) PALM HARBOR FL 34685 83 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 Statutos. Firgistered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE Change Change Addition KAYLOR, PATRICK NAME 1.2 NAME 31622 U.S. HWY, 19, N. 3160B US HWY 19 N. STREET ADORESS 1.3 STREET ADDRESS PALM HARBOR FL 34685 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS City-St-78P 2 4 City - St - 7IP DELETE Change Addition 31 TITLE TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST-ZIP ☐ DELETE Change 41 TITLE ___ Addition TITLE

64 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the informal indicated on this annual report of qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an bowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corr Block 12 or Block 13 if char

4 2 NAME

51 TITLE

52 NAME

61 TITLE

62 NAME

DELETE

DELETE

43 STREET ADDRESS 4 4 CITY-ST-ZIP

53 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY-ST-ZIP

NAME

TITLE

NAME

TETLE

NAME

STHEET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST - 7IP

4/16/98

813.7848000

Change

Change

Addition

Addition

FILED

Apr 23 1998 8:00am

Secretary of State