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

FILED PROFIT Feb 09 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State

	1998		DIVISION OF CO	ORPORATIONS		Secretai	y of	Sta	ite
DOCUMENT # P94000079406 (2) MATERICAN PROPERTIES INC.									
WATERFORD PROPERTIES, INC.						1 28 8 1 1 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nait 2011 (deid i	alli arar: MB:	18 8311 1881
1									
Principal Plac	e of Business	Mai	ling Address				FRIIF NEIER IVOIS II	1611 01811 68 1	
1313 DIVOT LANE 1313 DIVOT LANE									
TAMPA FL 33612 TAMPA FL 33612					DO NOT WRI	TE IN THIS SP	ACE		
Ì						3. Date Incorporated or Qualified			
						10/27/1994			
	Place of Business		Mailing Address	sect pel		4. FEI Number			oplied For
21 3 108 Suite, Apt.	Prispect (2d)	26	3109 1/051 Buite, Apt. #, etc.	DEC! 1-4		65-0540214		\$8.75	ot Applicable
22	π, σισ.	27	2010, Apr. 11, CIC.			5. Certificate of Status Desired		Fee Re	
City & Stat	le,		City & State			6. Election Campaign Financing		\$5.00	May Be
23 074		28		<u>[e</u>		Trust Fund Contribution		Added	
Zip 33	Country	29	33629	Country		 This corporation owes or has personal Property Tax due Jur 			angible No
24	9. Name and Address of Cu			1		10. Name and Address of New F	· · · · · · · · · · · · · · · · · · ·		2 140
WILLIAMS, JAMES B 81 Name						record L. William	i		
1						S (P.O. Box Number is Not Accept:			
TAI	MPA FL 33612				<u> 3</u>	108 Prospect Pull			
}				83		•			
				84 City	7	С., с.	FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607	7.1508. Florida Statutes	the above-named	d corpor	ration submits this statement for the		hanging it	s registered
office or r	registered agent, or both, in the S	tate of Florida	i. Such change was au Section 607 0505, Flori	thorized by the cor	poratio	ration submits this statement for the n's board of directors. I hereby acc	ept the appoir	ntment as	registered
SIGNATURE		homs		Amon of	Me		2/2/98		
	Signature, typed or crinted hame of registerer	d agent and title if			e required	when reinstating)	DATE		
12.	PD	AND DIRECT	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFF		Change	Addition
NAME	WILLIAMS, JAMES B		7 N-44-11	1.2 NAME			_	gu	
STREET ADDRESS	1313 DIVOT LANE			1,3 STREET ADDRESS	Í				1
CITY-ST-ZIP	TAMPA FL			1.4 CITY - ST - ZIP					
TITLE	VPS		☐ DELETE	2.1 TITLE	PI	D		Change	Addition (
NAME	WILLIAMS, GREGORY L			2.2 NAME	60	egory L. bellhoms			
STREET ADDRESS	3108 PROSPECT RD			2.3 STREET ADDRESS	30	>8' Prospect RD	_		
CITY-ST-ZIP	TAMPA FL		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	Ta	who Er 3395)	Change	Addition
NAME				3.2 NAME	}		_		
STREET ADDRESS				3.3 STREET ADDRESS	ĺ				
CITY-ST-ZIP				3.4. CITY-ST-ZIP	ĺ				
TITLE			DELETE	4.1 TITLE			Ľ	Change	Addition
NAME				4, 2 NAME					1
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CITY - ST - ZIP			DELETE	4.4 CITY-ST-ZIP	 		_ 	Change	Addition
TITLE			E DETEIE	5.1 TITLE 5.2 NAME]		L.,) Orienties	- Vogition
NAME STREET ADDRESS	!			5.2 NAME 5.3 STREET ADDRESS)				Í
CITY-ST-ZIP				5.4 CITY - ST - ZIP					
TITLE			DELETE	6.1 TITLE				Change	Addition
NAME				6.2 NAME	1				
STREET ADDRESS				6.3 STREET ADDRESS					ļ
CITY OF TID				64 CITY_ST_7ID	ì				í

14. hereby certify that the information supplied with this filling 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:

THE REQUIRED

813-254-6323