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FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000014407 (7)

1. Corporation Name

REALTY BEE-LINE, INC.



Principal Place of Business 4842 CYPRESS GARDEN ROAD WINTER HAVEN FL 33884	Mailing Address 4842 CYPRESS GARDEN ROAD WINTER HAVEN FL 33884-2808
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2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

COOK, WILLIAM V
4842 CYPRESS GARDEN ROAD
WINTER HAVEN FL 33884

3. Date Incorporated or Qualified

02/20/1995

3a. Date of Last Report

07/08/1996

4. FEI Number

65-0556212

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME COOK, WILLIAM V
STREET ADDRESS 4842 CYPRESS GARDEN ROAD
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE VSD ☐ DELETE

NAME SALAJKA, ROBERT V
STREET ADDRESS 4842 CYPRESS GARDEN ROAD
CITY-ST-ZIP WINTER HAVEN FL 33884

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

☐ Change ☐ Addition

11 NAME

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 NAME

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 NAME

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 NAME

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 NAME

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 NAME

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

DIR,
SUZANNE + SAL MORACO
4842 Cypress Garden Rd.
Winter Haven, FL 33884

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:  REQUIRED

4/30/97 941-325-9295

CRZE034 (9/96)