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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90072 045 \*\*\*150.00

## DOCUMENT # P95000029925

1. Corporation Name

SAWYER	REALTY GROUP, INC.					
Data de la Diseas	of Ducines	Mailing Address				L TORRINGS HIS FIRST DIRIN SOUN SOUN SOUN SOUNT RIGHT FIRST FORM FOR HIS HOUR HOUR BUILD FOR
Principal Place of Business Mailing Address						
8601 - 4TH ST, NO. 8601 - 4TH ST, NO. SUITE 209 SUITE 209						
ST. PETERSBURG FL 33702 ST. PETERSBURG FL 33702						DO NOT WRITE IN THIS SPACE
US		US				3. Date Incorporated or Qualifed
						04/17/1995
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26			-	59-3310122   Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certifcate of Status Desired   \$8.75 Additional Fee Required
City & State City & State						Election Campaign Financing \$5.00 May Be
23	28					Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible
24	25	293	10		_	Personal Property Tax.
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
0.11	NUMBER ARREST			81	Name	
SAWYER, MARK G. 1141 DARLINGTON OAK DR. N.E.				82	Street A	Address (P.O. Box Number is Not Acceptable)
ST. PETERSBURG FL 33701				83		
				84	City	85 Zip Code
}				$\square$		FL 87 25 3000
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		egistered	Agen	it signature rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PVD OFFICERS AN	DELETE	1.1 777	.—— П F	——— <u>—</u>	Change Addition
[ [	SAWYER, MARK G		1.2 NA		-	_ , _
NAME	AAAA DADUMOTON OAK DODE NODTHEADT				ADDRESS	•
STREET ADDRESS	ST. PETERSBURG FL 33703	MONTHEAGE	1.4 CF			
CITY-ST-ZIP	STD STD	☐ DELETE	2.1 TI		1-21-	☐ Change ☐ Addition
NAME	SAWYER, SUSAN H		2.2 NA		ł	-
STREET ADDRESS	1141 DARLINGTON OAK DRIVE	NORTHEACT			ADDRESS	
	ST. PETERSBURG FL 33703	HOMILAGI	2.4 CI			
CITY-ST-ZIP	31. PETENODORO TE 33703	☐ DELETE	3.1 11			☐ Change ☐ Addition
NAME :			3.2 NA			<del>_</del>
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			3.4. C		Ļ	
TITLE		☐ DELETE	4.1 717			☐ Change ☐ Addition
NAME			4. 2 N		ŀ	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			4.4 CT			
TITLE		☐ DELETE	5.1 TIT			☐ Change ☐ Addition
NAME			5.2 NA	ME	-	
STREET ADDRESS			5.3 ST	REET	ADDRESS	
CITY-ST-ZIP			5.4 CT	TY-\$1	T- ZIP	
TITLE		☐ DELETE	6.1 TIT	πE		☐ Change ☐ Addition
NAME			6.2 NA	AME	Ì	
CTDCCT ADDDCCC			6.3 ST	REET	ADDRESS	

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 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, with all other like empowered.

CITY-ST-ZIP