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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000040768 (0)

BERJER PROPERTIES, INC.

## FILED May 13 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						
901 NW 57Th		901 NW 57TH STREET				
GAINESVILLE FL 32605		GAINESVILLE FL 32605				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						05/22/1995
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				<b>59-3329779</b> Not Applicable
Suite, Apt. #, etc.		27 Suite, /	Suite, Apt. #, etc.			5. Certificate of Status Desired
City & State			City & State			6. Election Campaign Financing \$5.00 May Be
23		28	28			Trust Fund Contribution Added to Fees
Zip	Country	7ip	Count		,	8. This corporation owes or has paid the current year Intangible
24	25 Name and Address of Curre	29		30]		Personal Property Tax due June 30.  Yes No  10. Name and Address of New Registered Agent
9, Name and Address of Current Registered Agent  CALTED IAMES D. 81 Na					Name	
SALTER, JAMES D 703 NE FIRST STREET						
GAINESVILLE FL 32602			82	Street	t Address (P.O. Box Number is Not Acceptable)	
				83		
				84	City	85 Zip Code
11 Purcuant t	to the provisions of Sections (O7 00)	02 and 607 1508	Elorida Statute	as the above	a-namod	d corporation cultimite this statement for the purpose of changing its resistand.
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 Succept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
	m tamiliar with, and accept the oblig	jations of, Section	1 607,0505, FIC	orida Statute	S.	
SIGNATURE	Signature typed or profed hand of registered as	port and title if applicable	e (NOTE	L Registered Ag	unt signature	re required when reinstating) DATE
12.	OF LICERS AN	ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		☐ DELETE	1,1 TITLE		☐ Change ☐ Addition
NAME	SQUITIERI, ALAN			1.2 NAME		
STREET ADDRESS	901 NW 57TH STREET				ADDRESS	;
CITY-ST-ZIP	GAINESVILLE FL 32605		DELETE	1.4 CITY-5	T-ZIP	
TITLE NAME			T DETELE	21 TITLE 22 NAME		L. Change L. Addition
STREET ADORESS				23 STREE	AD08499	
CITY-ST-ZIP				2.4 GITY-		
TITLE			DELETE	3.1 TITLE	<u> </u>	Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREE	ADDRESS	
CITY-ST-ZIP		<u> </u>		3.4. CITY -	ST-ZIP	
TITLE			□ DELETE	4.1 TITLE		Change Addition
NAME				4. 2 NAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			DELETE	4.4 City-5	ST - ZIP	Change Addition
TITLE			occur	5.1 TITLE		L_ Change L_ Addition
NAME Street address				5.2 NAME 5.3 STREE	ADDIDECE	
CITY-ST-ZIP				5.4 CITY - 5	ŀ	
TITLE			DELETE	6.1 TITLE	11 - EIF	☐ Change ☐ Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREE	ADDRESS	

64City-St-ZiP 64