

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000046881

PEGGY HOPPIN REALTY, INC.				1 /831/331 (18 1810)	MICH ARIS NAME ATSIC SAME	AIAIN BHINI (AID) (	DINI 1181 1881
Principal Place	e of Business	Mailing Address		-1 (03)(300) \$10 (0)01	Billi Obili Bairi Obili Balli	Nigue Bilen ianan 1	OLDI IEDA IODE
102901 OVERSE KEY LARGO FL		P O BOX 2427 KEY LARGO FL 33037			AIOT MIDITE IN THIS	SDACE	
us US					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed		
	•			06/05/1995	Qualifec		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number		Apr	olied For
21		26		65-0589918		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status	Desired 💢	<b>\$8.75</b> A Fee Red	
City'& Stat	e but I	- City & State	<del></del>	6. Election Campaign	Financing-	\$5.00	May Be -
23		28		Trust Fund Contribu	I I	Added to	Fees
Zip	Country	Zip	Country	8. This corporation ow	•	angible	<u>.</u>
24	25	29 30	)	Personal Property T			XNo
	9. Name and Address of Current	Registered Agent	94 Nome d	10. Name and Address	s of New Registered	Agent	
VALK	CHAN DECCY	81 Name	Peggu H	OPPIN			
VAUGHAN, PEGGY 102901 OVERSEAS HWY			82 Street A	ddress (P.O. Box Number is N			
	LARGO FL 33037		83 //	707 Grou	ver Ln		
, KLI	EARGO I E 30,007		∣°'  <del>Ke</del>	V Large			
		•	84 City	by Largo	FL	85 Zip C 33	037
11. Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligate	2 and 607.1508, Florida Statutes, of Florida. Such change was authions of Section 607.0505. Florid	the above-named corrised by the corpor a Statutes.	orporation submits this statem ation's board of directors. I he	ent for the purpose of reby accept the appo	changing its intment as reg	registered jistered
SIGNATURE	Pragu Honn	in L	2000	conse	4-2	-97	
SIGNATURE	Signature, typed on plinted name of registered agent	and title if applicable. (NoTE: Re	entered Apont signature rec		DATE		
12.	OFFICERS ANI		13.		ES TO OFFICERS AI		
TITLE	PTSD	DELETE	1.1 TITLE	PTSD. Dece	· //	Change	☐ Addition
NAME	VAUGHAN, PEGGY		1.2 NAME	Hoppin, regg	1 <i>y</i> ,		-
STREET ADDRESS				707 Groupe	5 hh	P==	}
CITY-ST-ZIP	KEY LARGO FL		1.4 CiTY-ST-ZIP	Key Largo, F	<u>L 3303</u>	Change	☐ Addition
TITLE		☐ DELETE	2.1 TITLE	/		☐ Change	☐ voninou
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP			2.4 CITY-ST-ZIP 3.1 TITLE			☐ Change	Addition
-TITLE A		· · · · · · · · · · · · · · · · · · ·		<del>-</del> -			
NAME	· ·		3.2 NAME 3.3 STREET ADDRESS				
STREET ADDRESS			1		•		
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	*****		Change	Addition
NAME		LL SELECE	4. 2 NAME				_
			4.3 STREET ADDRESS				İ
STREET ADDRESS			4.4 CITY-ST-ZIP				
CITY-ST-ZIP		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME		<del>-</del>	5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				}
CITY-ST-ZIP			5.4 CITY-ST-ZIP				ĺ
TITLE		☐ DELETE	6.1 TITLE		W	Change	Addition
NAME			6.2 NAME				

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURES

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90168 022 \*\*\*158.75