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Mar 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000056646 (9)

1. Corporation Name
SIERRA REALTY, INC.

Principal Place of Business
4221 HIGHWAY 90 WEST
PACE FL 32571

Mailing Address
4221 HIGHWAY 90 WEST
PACE FL 32571-2011



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

CLOMAN, LYNN DONNA
4221 HWY 90
PACE FL 32571

3. Date Incorporated or Qualified

07/21/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3325147

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 SIMMONS, Phillip MORRAN
82 Street Address (P.O. Box Number is Not Acceptable)
4221 HWY 90
83
84 City PACE FL 85 Zip Code 32571

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 Phillip M Simmons

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-24-97

12. OFFICERS AND DIRECTORS

| | | |
|----------------|----------------------|--------|
| TITLE | PST | DELETE |
| NAME | SIMMONS, BRENDA J | |
| STREET ADDRESS | 4221 HIGHWAY 90 WEST | |
| CITY-ST-ZIP | PACE FL 32571 | |
| TITLE | D | DELETE |
| NAME | CLOMAN, DONNA L | |
| STREET ADDRESS | 4221 HWY 90 | |
| CITY-ST-ZIP | PACE FL 32571 | |
| 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

| | |
|--------------------|-------------------------------|
| 1.1 TITLE | Change Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | Change Addition |
| 2.2 NAME | DIRECTOR/VP |
| 2.3 STREET ADDRESS | PHILLIP M SIMMONS |
| 2.4 CITY-ST-ZIP | 4221 HWY 90 PACE, FL 32571 |
| 3.1 TITLE | Change Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY-ST-ZIP | |
| 4.1 TITLE | Change Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | Change Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | Change Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY-ST-ZIP | |

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: Phillip M Simmons

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-97 (904) 994-9334

Date Daytime Phone #

CR2E034 (9/96)