

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

FILED  
Apr 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P95000062467 (2)**

1. Corporation Name

**COAST 2 COAST REALTY (KISSIMMEE), INC.**

Principal Place of Business

**SOUTH BERMUDA AVE.  
1250 A  
KISSIMMEE FL 34741**

Mailing Address

**SOUTH BERMUDA AVE.  
1250 A  
KISSIMMEE FL 34741**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**08/10/1995**

4. FEI Number

**59-3330638**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 <b>SOUTH BERMUDA AVE</b>	26 <b>SOUTH BERMUDA AVE</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 <b>1248</b>	27 <b>1248</b>
City & State	City & State
23 <b>KISSIMMEE FL</b>	28 <b>KISSIMMEE FL</b>
Zip	Zip
24 <b>34741</b>	29 <b>34741</b>
Country	Country
25 <b>U.S.A.</b>	30 <b>U.S.A.</b>

9. Name and Address of Current Registered Agent

**ARCHER, BRIAN  
1250 S BERMUDA AVE  
SUITE B  
KISSIMMEE FL 34742**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1248 S. BERMUDA AVE**  
83  
84 City **KISSIMMEE** FL 85 Zip Code **34741**

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ARCHER, BRIAN</b>	1.2 NAME	
STREET ADDRESS	<b>1250A S BERMUDA AVE</b>	1.3 STREET ADDRESS	<b>1248 S. BERMUDA AVE</b>
CITY - ST - ZIP	<b>KISSIMMEE FL</b>	1.4 CITY - ST - ZIP	<b>KISSIMMEE FL 34741</b>
TITLE	VPTD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ARCHER, LIANE</b>	2.2 NAME	
STREET ADDRESS	<b>1250A S BERMUDA AVE</b>	2.3 STREET ADDRESS	<b>1248 S. BERMUDA AVE</b>
CITY - ST - ZIP	<b>KISSIMMEE FL</b>	2.4 CITY - ST - ZIP	<b>KISSIMMEE FL 34741</b>
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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.

SIGNATURE:

**LIANE ARCHER**

**1/9/98**

**407-944-0022**

CR2E034 (10/97)