

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000074367 (0)

1. Corporation Name
LAND & CASTLE REALTY INC.



Principal Place of Business
**33 WEST GULF BEACH DRIVE
ST. GEORGE ISLAND FL 32326**

Mailing Address
**33 WEST GULF BEACH DRIVE
ST. GEORGE ISLAND FL 32326-2708**

3. Date Incorporated or Qualified
09/26/1995

3a. Date of Last Report
08/23/1996

4. FEI Number
59-3338008

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 Zip Country

25 Suite, Apt. #, etc

26 City & State

27 Zip Country

28 Zip Country

29 Zip Country

30 Zip Country

9. Name and Address of Current Registered Agent
**LONDONO, BETTY JEAN
33 WEST GULF BEACH DRIVE
ST. GEORGE ISLAND FL 32326**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
165 CESSNA DRIVE SUITE 107

83 **PORT ST LEE**

84 City

85 Zip Code
FL 32456

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 *Betty Londono* **8/1/97**
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **D LONDONO, BETTY JEAN**

STREET ADDRESS **P.O. BOX 205 N/A**

CITY - ST - ZIP **APALACHICOLA FL 32329**

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

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 **100002398671---3**

1.4 CITY - ST - ZIP **-01/13/98--01084--004**

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS *****180.00 ***180.00**

2.4 CITY - ST - ZIP

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: *Betty Londono* **8/1/97** **850 937-3557**

CR2E034 (9/96)