

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

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # **P95000095260**  
1. Corporation Name

**Ginles Realty, Inc.**

FILED

97 JUL -8 AM 11: 57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business: **1 East Broward Blvd. Suite 700 Fort Lauderdale, FL 33301**  
Mailing Address: **1 East Broward Blvd Suite 700 Ft. Lauderdale, FL 33301**

3. Date Incorporated or Qualified: **12/14/95**  
3a. Date of Last Report: **05/01/96**  
4. FEI Number: **65-0633908**  
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

21. Principal Place of Business: Suite, Apt. #, etc. City & State Zip Country  
22. Mailing Address: Suite, Apt. #, etc. City & State Zip Country  
23. City & State Zip Country  
24. City & State Zip Country

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

81 Name: **Lester E. Moody**  
82 Street Address (P.O. Box Number is Not Acceptable): **320 Lido Drive**  
83  
84 City: **Ft. Lauderdale** FL 85 Zip Code: **33301**

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 607.0705, Florida Statutes.

SIGNATURE: *Lester E. Moody* DATE: **6-30-97**

**12. OFFICERS AND DIRECTORS**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1. TITLE:  DELETE  
NAME: **D Moody, Virginia D.**  
STREET ADDRESS: **1 East Broward Blvd, Ste 700**  
CITY-ST-ZIP: **Ft. Lauderdale, FL 33301**  
2. TITLE:  DELETE  
NAME:  DELETE  
STREET ADDRESS:  DELETE  
CITY-ST-ZIP:  DELETE  
3. TITLE:  DELETE  
NAME:  DELETE  
STREET ADDRESS:  DELETE  
CITY-ST-ZIP:  DELETE  
4. TITLE:  DELETE  
NAME:  DELETE  
STREET ADDRESS:  DELETE  
CITY-ST-ZIP:  DELETE

11 TITLE:  Change  Addition  
12 NAME:  Change  Addition  
13 STREET ADDRESS:  Change  Addition  
14 CITY-ST-ZIP:  Change  Addition  
21 TITLE:  Change  Addition  
22 NAME:  Change  Addition  
23 STREET ADDRESS:  Change  Addition  
24 CITY-ST-ZIP:  Change  Addition  
31 TITLE:  Change  Addition  
32 NAME:  Change  Addition  
33 STREET ADDRESS:  Change  Addition  
34 CITY-ST-ZIP:  Change  Addition  
41 TITLE:  Change  Addition  
42 NAME:  Change  Addition  
43 STREET ADDRESS:  Change  Addition  
44 CITY-ST-ZIP:  Change  Addition  
51 TITLE:  Change  Addition  
52 NAME:  Change  Addition  
53 STREET ADDRESS:  Change  Addition  
54 CITY-ST-ZIP:  Change  Addition  
61 TITLE:  Change  Addition  
62 NAME:  Change  Addition  
63 STREET ADDRESS:  Change  Addition  
64 CITY-ST-ZIP:  Change  Addition

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\*\*\*\*165.00 \*\*\*\*165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Virginia D. Moody* DATE: **4-28-97** 764-954-5461

CR2E034 (9/96)