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Secretary of State

03-22-1999 90114 023 ***150.00



PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000019447

1. Corporation Name
JAPANESE GARDENS REALTY, INC.

Principal Place of Business
 6181 TEAHOUSE RD.
 VENICE FL 34293

Mailing Address
 6181 TEAHOUSE RD.
 VENICE FL 34293

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/29/1996

4. FEI Number
65-0664442

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 the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KORP, WILLIAM R
333 S. TAMiami TRAIL
SUITE 199
VENICE FL 34285

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)

83
 84 City **FL** 85 Zip Code

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

T DELETE
 NAME **BRADY, EDWIN L.**
 STREET ADDRESS **5631 ORANGE BLOSSOM**
 CITY-ST-ZIP **VENICE FL 34293**

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

VP DELETE
 NAME **SHONGOOD, RUTH**
 STREET ADDRESS **500 MORNING GLORY**
 CITY-ST-ZIP **VENICE FL 34293**

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

P DELETE
 NAME **NELSON, CHARLES**
 STREET ADDRESS **551 ORIENTAL POPPY DR.**
 CITY-ST-ZIP **VENICE FL 34293**

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

S DELETE
 NAME **BOWSER, GEORGINA**
 STREET ADDRESS **5740 HYACINTH**
 CITY-ST-ZIP **VENICE FL 34293**

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

DELETE

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

DELETE

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 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, with all other like empowered.

SIGNATURE: *Charles Nelson* **SIGNATURE REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **3/16/99** Daytime Phone # **941-493-0030**

CR2E034 (1/1/98)