FILED Apr 02, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000020354

DEE VALLEY PROPERTIES, INC.

								81(1) #1 1 (18
Principal Place	of Business	Mailing Address	 .,					
LAMARA MOTEL APTS LAMARA MOTEL APTS								
520 73RD AVENUE 520 73RD AVENUE						DO NOT WRITE IN THIS SPACE		
ST PETE BEACH FL 33706 ST PETE BEACH, FL 33706			6 ·			3. Date Incorporated or Qualifed	13 SFACE	
US US						•		
· · _ · · · · · · · · · · · · · · · · ·			غر <u>ده د</u>	<u> </u>		03/05/1996 4. FEI Number	- I Ann	plied For
2. Principal Pl	ace of Business	2a. Mailing Address					<u> </u>	t Applicable
21		26				NOT APPLICABLE	\$8.75 A	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	Fee Re	
22		27						
City & State	9	City & State			-	6. Election Campaign Financing	** \$5.00 t Added to	
23		28	Cou	ota		Trust Fund Contribution		o rees
Zip				B. This corporation owes the current year Intangible				
24	25	29	30			Personal Property Tax. 10. Name and Address of New Registere		
	9. Name and Address of Currer	nt Registered Agent		81 N	Name	10. Name and Address of New Registere	na Agent	
IOUI	NCON CDAHAM			" '	Valle			
JOHNSON, GRAHAM			82 8	Street Addre	ss (P.O. Box Number is Not Acceptable)			
LAMARA MOTEL APTS								
	73RD AVENUE			83				J
SIP	ETE BEACH FL 33706			84 (City	<u> </u>	. 85 Zip C	Code
	•				•	<u>·</u> F	L	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the a	bove-n	amed corpo	ration submits this statement for the purpose	of changing its	registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was a ations of Section 607,0505. Flo	autnorized orida Stati	i by the utes.	e corporation	n's board of directors. I hereby accept the app	Diritinent as reg	gistored
	The factor of th							Į.
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOT)	E: Registered	Agent się	pariuper eruteng	when reinstating) DATE		
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	DP	☐ DELETE	1.1 Ti	пБ				
NAME			1.7 ()	ICL			Change	☐ Addition
	JOHNSON, GRAHAM	222272	1.2 N/				∐, Cnange	Addition
STREET ADORESS	JOHNSON, GRAHAM 520 73RD AVENUE		1.2 N/		DDRESS		Cnange	☐ Addition
STREET ADORESS	520 73RD AVENUE	2	1.2 N/ 1.3 ST	NAME TREET AD] Cnange	☐ Addition
CITY-ST-ZIP		DELETE	1.2 N/ 1.3 ST	NME REET AD TY-ST-ZI			Change	Addition
CITY-ST-ZIP	520 73RD AVENUE		1.3 ST 1.4 CI 2.1 TI	AME TREET AD TY-ST-ZI TLE				
CITY-ST-ZIP TITLE NAME	520 73RD AVENUE		1.2 N/ 1.3 ST 1.4 CI 2.1 TV 2.2 N/	TREET AD TY-ST-ZI TLE AME	IP			
CITY-ST-ZIP TITLE NAME STREET ADDRESS	520 73RD AVENUE		1.2 N/ 1.3 ST 1.4 CI 2.1 TI 2.2 N/ 2.3 ST	TREET AD TY-ST-ZI TLE AME	DDRESS			
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	520 73RD AVENUE	☐ DELETE	12 N/ 1.3 ST 1.4 CI 2.1 TI 2.2 N/ 2.3 ST 2.4 C 3.1 TI 3.2 N/	TREET AD TY-ST-ZI TLE AME TREET AD ITY-ST-Z TLE	DDRESS .		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	520 73RD AVENUE	☐ DELETE	1.2 NV 1.3 ST 1.4 CI 2.1 TI 2.2 NV 2.3 ST 2.4 C 3.1 TI 3.2 NV 3.3 ST	TY-ST-ZI TLE AME TY-ST-ZI TLE TREET AD TY-ST-Z TLE AME TREET AD	DORESS DORESS		☐ Change	Addition
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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 cath; 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, of or an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: _

STREET ADDRESS

CITY-ST-ZIP