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May 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P96000048360 (7)**

1. Corporation Name
HIPPS REALTY, INC.

Principal Place of Business	Mailing Address
5110 LAND O'LAKES BLVD LAND O'LAKES FL 34639	5110 LAND O'LAKES BLVD LAND O'LAKES FL 34639-3723

3. Date Incorporated or Qualified: 06/03/1996
3a. Date of Last Report:

2. Principal Place of Business
21: 3208 Land O'Lakes Blvd
22: Suite, Apt. #, etc.
23: City & State: Land O'Lakes, Florida
24: Zip: 34639
25: Country:

2a. Mailing Address
26: 3208 Land O'Lakes Blvd
27: Suite, Apt. #, etc.
28: City & State: Land O'Lakes, Florida
29: Zip: 34639
30: Country:

4. FEI Number: 59-3399044 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HIPPS, DAVID E SR
5110 LAND O'LAKES BLVD
LAND O'LAKES FL 34639

10. Name and Address of New Registered Agent

81 Name: David E. Hipps Sr
82 Street Address (P.O. Box Number is Not Acceptable): 3208 Land O'Lakes Blvd
83:
84 City: Land O'Lakes FL 85 Zip Code: 34639

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: David E. Hipps Sr — David E. Hipps Sr — 4-15-97
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	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HIPPS, DAVID E SR		1.2 NAME	
STREET ADDRESS	5110 LAND O'LAKES BLVD		1.3 STREET ADDRESS	3208 Land O'Lakes Blvd
CITY-ST-ZIP	LAND O'LAKES FL 34639		1.4 CITY-ST-ZIP	Land O'Lakes, Fl 34639
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HIPPS, DAVID E JR		2.2 NAME	
STREET ADDRESS	5110 LAND O'LAKES BLVD		2.3 STREET ADDRESS	3208 Land O'Lakes Blvd
CITY-ST-ZIP	LAND O'LAKES FL 34639		2.4 CITY-ST-ZIP	Land O'Lakes, Fl 34639
TITLE	D	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	GRANT, RICHARD		3.2 NAME	
STREET ADDRESS	5110 LAND O'LAKES BLVD		3.3 STREET ADDRESS	3208 Land O'Lakes Blvd
CITY-ST-ZIP	LAND O'LAKES FL 34639		3.4 CITY-ST-ZIP	Land O'Lakes, Fl 34639
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (9/96)

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: David E. Hipps Sr — David E. Hipps Sr — 4-15-97 — 813-909-9200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #