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

Mailing Address

#402

7851-A ASHELY PK CT.

ORLANDO FL 32835

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 04 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

Sandra B. Mortham

Secretary of State
DIVISION OF CORPOBATIONS

DOCUMENT # P96000056440 (6)

REALTY SAVERS, INC.

Principal Place of Business 7851-A AHLEY PK CT.

ORLANDO FL 32835

#402

<u>07/01/1996</u> Applied For 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Not Applicable 21 26 59-3406845 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Ζip Country Country This corporation owes or has paid the current year Intangible □Ño 24 Yes 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HAWKS, CHARLES W 340 RINGWOOD CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) WINTER SPRINGS FL 32708 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, 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 office or registered agent, or both, in the State of Floria. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE nt and tide if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. POT ☐ DELETE 1.1 TITLE Change __ Addition TITLE HAWKS, CHARLES W NAME 1.2 NAME 340 RINGWOOD CIRCLE 1.3 STREET ADDRESS STREET ADDRESS WINTER SPRINGS FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE DVS Change Addition TITLE 2.1 TITLE WILSON, WALLACE M NAME 2.2 NAME **5028 AUTUMN RIDGE LANE** STREET ADDRESS 2.3 STREET ADDRESS WINDERMERE FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 3.1 TOLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 THLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 63 STREET ADDRESS STREET ADDRESS 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, and that my name address.