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 # P96000065621

1. Corporation Name

DEBBIE BATMAN REALTY, INC.

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90162 016 ***150.00



Principal Place	e of Business	Mailing Address				# 100110081 (13) 40110 01111 00111 00	{} \ \ \ \ \ \ \ \ \ \ \ \ \ \	JU 83101 01110 03119	11081 1181 1007
200 E WASHINGTON STREET CLERMONT FL 34711 200 E WASHINGTON STREET CLERMONT FL 34711						DO NOT WRI	ΓΕ IN THI	S SPACE	
						3. Date Incorporated or Qualifed			
						08/05/1996			
Principal Place of Business 2a. Mailing Address						4. FEI Number		Ap	plied For
21		26				<u>59-3391018</u>	ـــ	`-	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A Fée Re	
City & State	•	City & State				6. Election Campaign Financing	••	\$5.00	May Bo
23	5	28				Trust Fund Contribution		Added to	
Zip	Country	Zip	Count	try		8. This corporation owes the curr	ent year Ir		
24	4 25 29 30				Personal Property Tax. ☐ Yes ☐ No				
	9. Name and Address of Curren	ıt Registered Agent				10. Name and Address of New F	Registered	d Agent	
	MAN DEDDIE		8	31	Name				ĺ
BATMAN, DEBBIE 200 E WASHINGTON STREET CLERMONT FL 34711			8	32	Street Addres	ss (P.O. Box Number is Not Accepta	able)		
			8	33					
			1	84	City			85 Zip (Code
					•		FI	L	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut	inorized t	by th	named corpor ne corporation	ration submits this statement for the 's board of directors. I hereby accept	purpose on the appo	of changing its pintment as re-	registered gistered
SIGNATURÉ									
	Signature, typed or printed name of registered ages			gent s	signature required v		DATE	NO DIDECTO	200 111 40
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS A	Change	Addition
TITLE	D	☐ DELETE	1.1 TITL					change	
NAME	BATMAN, DEBBIE		1.2 NAM						ĺ
STREET ADDRESS	200 E WASHINGTON STREET				DORESS				
CITY-ST-ZIP	CLERMONT FL 34711	Document	1.4 CITY		ZIP			☐ Change	Addition
TITLE		☐ DELETE	2.1 TITLE					Change	Addition
NAME			2.2 NAM						
STREET ADDRESS	ss ·			2.3 STREET ADDRESS		=			ţ
CITY-ST-ZIP	DELETE		_	2.4 CITY- ST-ZIP				☐ Change	Addition
TITLE		∏ nere (c	3.1 TITL					in change	
NAME			3.2 NAM						
STREET ADDRESS					ODRESS				
CITY-ST-ZIP		☐ DELETE	3.4. CIT		·ZIP		···	☐ Change	Addition
TITLE		C) Netere							
NAME			4. 2 NAN		DDDC00				
STREET ADDRESS			1		NDDRESS				
CITY-ST-ZIP		DELETE	4.4 CITY 5.1 TITL		ZIP			☐ Change	Addition
TITLE		FT VECEL	5.1 (III.						
NAME					ADDRESS				
STREET ADDRESS			5.4 CITY						
CITY-ST-ZIP		☐ DELETE	6.1 TITL		LIF'			Change	Addition
TITLE		□ nere+e	6.2 NAM						
NAME ·					LOODECC .				
STREET ADDRESS			6.3 SIR	CELA	NDORESS				

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 suppliemental 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 a characteristic and 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. empowered. Debbie Batman,

ING OFFICER OR DIRECTOR

ି President

2/5/99

352-394-6481