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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 POCCO

DOCUMENT # P96000070482 (0)

O'DELL COMMERCIAL REALTY CONSULTANTS, INC.

Principal Place of Business

Mailing Address

1800 LAGO COURT ST CLOUD FL 34789

1800 LAGO COURT ST CLOUD FL 34769-1630

FILED Mar 13 1997 8:00am Secretary of State



ST CLOUD FL	34769	ST CLOUD FL 34769-1630					
1					3. Date Incorporated or Qualified 08/22/1996	3a. Date of Last Report	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied Fo	or
21 600	Thacker Ave.	26 600 Thac	ker f	ive.	159-3398214	Not Applica	able
Sulte, Apt.	#, etc. 6	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	al
City & State		City & State 28 Kissimme	ee, F	<u>L</u>	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 34 7	Country 25	29 3474 1 3	_ Country		8. This corporation has tiability for in Florida Statutes	ntangible tax under s. 199.032 Yes [] No	2,
	9. Name and Address of Current				10. Name and Address of New Reg		
O'DE	ELL, LARRY		81 1	Vame			
	LAGO COURT		00 (Name and Markets	(S.O. Bar N 1 - 1 - N - 4 1 - N - 4		
	CLOUD FL 34769		82 5	oreer Abor	ess (P.O. Box Number is Not Acceptabl	e)	İ
			83			,	
			B4 (Dity		B5 Zip Code	
43 -						FL T	
office or re agent. I a	to the provisions of Sections 607,0502 egistered agent, or both, in the State of maniliar with, and accept the obligat	and 607.1508, Florida Statutes, if Florida. Such change was aut ions of, Section 607.0505, Florid	, the above-h thorized by th da Statutes.	amed corp ne corporati	oration submits this statement for the prior's board of directors. I hereby accep	irpose of changing its register the appointment as registers	eq eta
SIGNATURE	Signature, typod or printed name of registered agent	and tile if applicable. (NOTE: F	legistered Agent a	ignature require	ed when reinslating)	DATÉ	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE		[
TITLE	D	DELETE	1.1 TITLE			☐ Change ☐ Add	dition
NAME	O'DELL, LARRY		1.2 NAME				l
STREET ADDRESS	1800 LAGO COURT		1.3 STREET AD	DRESS			1
City-St-ZiP	ST CLOUD FL 34769		14 CITY-ST-7	nP			8
TITLE	D	DELETE	21 TITLE			☐ Change ☐ Add	dition
NAME	O'DELL, JANET		2.2 NAME		1		ļ
STREET ADDRESS	1800 LAGO COURT		2.3 STREET AD	DRESS			
CITY-ST-ZIP	ST CLOUD FL 34769		2. 4 CITY - ST -	ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE		☐ DELETE	3.1 TITLE			☐ Change ☐ Add	dition
NAME			3.2 NAME				
ȘTREET ADDRESS			3.3 STREET AD	DRESS			
CITY-ST-ZIP			3 4. CITY - ST - 2	ZIP .			
TITLE		☐ DELETE	4.1 TITLE	l l		☐ Change ☐ Add	dition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET AD	DRESS			
CITY-ST-ZIP			4.4 C(1Y - ST - Z	IP .			
TITLE		DELETE	5.1 TITLE			Change Add	dilion
NAME		l	5.2 NAME	}			ľ
STREET ADDRESS			5.3 STREET AD	DRESS			
CITY-ST-ZIP			5.4 CHY-\$1-2	IP			
TITLE		DELETE	61 TITLE			☐ Change ☐ Add	dition
NAME	<u>.</u>		62 NAME				
STREET ADDRESS			6.3 STREET AD	DRESS			
CITY-ST-ZIP			6.4 CITY-S1-2	nP]			
14 Ldo hereh	being certify that the information supplied	with this filing does not qualify f	for the evening	ntion 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 recoiver 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.