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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000078519 (1)

M & R PROPERTIES, INC.

STREET ADORESS

SIGNATURE:

Principal Place of Business Mailing Address 13654 2ND AVENUE NE 13654 2ND AVENUE NE **BRADENTON FL 34202-2725 BRADENTON FL 34202** 3. Date Incorporated or Qualified 3a. Date of Last Report 09/20/1996 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 65-0696519 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Zip Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name STEPHEN F. VOIGT, P.A. 2414 BEE RIDGE ROAD Street Addréss (P.O. Box Number is Not Acceptable) 82 SARASOTA FL 34239 83 84 Zip Code City **B5** 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 Stor after, typed or product name of registered agent and title 4 applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) OFFICERS AND DIRECTORS 13. 12. DELETE 11 TITLE Change Addition PRESTORNT THEF WELLEAM M. BRUCE 1.2 NAME NAME 13654 2 M AVE N.E. 1.3 STREET ADDRESS STREET ADDRESS LCCHE 17, WITHOUS 1.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition SEDETARY / UTLE - PLESTONT DELETE 2.1 TITLE TITLE PACHARD C. NELLON 2.2 NAME NAME 4937 WALDON CERLE 2.3 STREET ADDRESS STREET ADDRESS orlando fl 32811 2. 4 CiTY-ST-ZIP CITY - \$1 - ZIP Change Addition DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADORESS STREET ADDRESS 3.4. CITY-ST-ZIP CHY-SI-ZIP ■ Addition DELETE 41 TOLE T171 F 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CHTY - ST - 71P 4.4 CHTY-ST-ZIP Addition DELETE ☐ Change 5.1 TITLE THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-\$T-ZIP CITY - ST- 2IP Addition DELETE 6.1 TITLE Change TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

Whathatan m Revie

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.