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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretar / of State
DIVISION OF CORPORATIONS

FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90061 017 ***150.00

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Corporation Name
 Out NED DD

MULTIPLE OWNER PROPERTIES, INC.

					· —-	AND BARBOT TO	LNI SUMBLI BISH (BIB)
Principal Place of Business Mailing Address							
1532 E. GULF BEACH DR ST GEORGE ISLAND FL 32328		1532 E. GULF BEACH DR ST GEORGE ISLAND FL 32328		DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualifed	SFACE.	
					10/11/1996		ł
2 Principal Pl	lace of Business	2a. Mailing Address			4. FEI Nur iber	Т.	Applied For
	lace of business	<u> </u>			58-2265869	⊢ -⊢	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			30-2203009		Ad ditional
	#, GlG.	27			5. Certifcate of Status Desired		Required
City & State	e	City & State			6. Election Campaign Financing	\$5.0	0 Мау Ве
23		28			Trust Fund Contribution		d to Fees
Zip	Country	Zìp	Countr	у	8. This corporation owes the current year Inta	angible	
24	25	29 3	o		Personal Property Tax.	Yes	[]No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered A	Agent	
			8	Name			
	HES, WHALEY		8	Street Ad	fress (P.O. Box Number is Not Acceptable)		
	E. GULF BEACH DR		10	Sileet Adi	ness (r.o. box rumber is not receptable)		
ST G	EORGE ISLAND FL 32328		8	3		 :	
			8	4 City		85 Zi	p Ccde
			į.	1 1	<u></u>		
office or re	egistered agent, or bolh, in the State o m familiar with, and accept the obligation	Florida. Such change was aut ons of, Section 607.0505, Florid	horized b la Statute	y the corporat	poration submits this statement for the purpose of tion's board of directors. I hereby accept the appoint	ntment as	registered
	Signature, typed or printed nai te of registered agent			ent signature requ	red when reinstating) DATE	D DIDEC	FOE O IN 42
<u> 12.</u>	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	☐ Chang	
TITLE	P		1.1 TITLE	1			e
NAME	HUGHES, WHALEY		1.2 NAME				
STREET ADDRE 3S	1532 E. GULF BEACH DR			ET ADDRESS			ļ
CITY-ST-ZIP	ST GEORGE ISLAND FL 32328	☐ DELETE	14 CITY-			Change	e
TITLE	ST DETERMINE	C) Dereie	2.1 TITLE			change	
NAME !	HUGHES, BETH		2.2 NAME				
STREET ADDRESS	1532 E. GULF BEACH DR			ET ADDRESS			- 1
CITY-ST-ZIP	ST GEORGE ISLAND FL 32328	☐ DELETE	2. 4 CITY-	ST-ZIP		Change	e Addition
TITLE			3 1 TITLE				
NAME			3.2 NAME				ì
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		☐ DELETE	3.4. CITY-			Chang	e
TITLE		(J OCLETE	ſ	•			
NAME			4. 2 NAMI				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 CITY- 5 1 TITLE			Chang	e Addition
TITLE			5.2 NAME				
NAME				ET ADDRESS			1
STREET ADDRESS			5.4 CITY-	ľ			ļ
CITY-ST-ZIP		☐ DELETE	6.1 TITLE			Chang	e Addition
TITLE			6.2 NAME				
NAME			2	ET ADDRESS			1
STREET ADDRESS				1			
CITY-ST-ZIP			6.4 CITY-	01-215			

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 indicaled on this annual report or supplemental annual report is true and accurate and that my signal une 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 change 1, or on an attagrament with an address, with all other like empowered

SIGNATURE

SOLA THE AND TYPED OF PRINTED JAME OF SIGNING OFFICE TO OF DIRECTOR

4/26/99

850-927-239/

CR2E034 (11/98)