	ING FEE AFTER	MAY 1ST IS \$550.00
PROFIT	Q# 40.	FLORIDA DEPARTMENT OF ST

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PROFIT CORPORATION ANNUAL REPORT 1999	Kat Se	DEPARTMENT OF STATE therine Harris cretary of State I OF CORPORATIONS	- 69 (IIII) 99 (IIII 22 PH 1: 35	
DOCUMENT # P96000 1. Corporation Name Capital City Re	alty crou	ip. Inc.	Share Enchisa	
Principal Place of Business 2392-B Han			DO NOT WRITE IN THIS SP	ACE
Tallahassee	FI 3	32308	3. Date Incorporated or Qualifed	
2. Principal Place of Business	2a. Mailing Address		4. FE Number 340 1.551	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc).		8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 25 9. Name and Address of Curre	Zip 29	Country 30	This corporation owes the current year Inlang Personal Property Tax. 10. Name and Address of New Registered Age	Yes No
Katherine G. B 2292 Hampsh	ive way	<u> </u>	stess (P.O. Box Number is Not Acceptable)	~ (
2292 Hampsh Tallahassee, 11. Pursuant to the provisions of Sections 607.05 office or registered agent or both, in the State agent. I am familiar atth and accept the oblig	TL 3230 S O2 and 607,1508, Florida S e of Florida Sych change x	83 84 City—Contained corporation and authorized by the corporation	allahasse FL poration submits this statement for the purpose of chains board of directors. Thereby accept the appointment	
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