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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000102187 (7)

LOGAN REALTY CORPORATION

Principal Place 15200 JOG RD SUITE A-4 DELRAY BEACH		Mailing Address 15200 JOG RD SUITE A-4							
CELINAT DENOT	1 FL 30404	DELRAY BEACH FL 33446-1.	247			3. Date Incorporated or Qualified 3a. I 12/17/1996	Date of Last R	eport	
2. Principal P	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	T Ar	plied For	
21		F	26			L5-07 13846		ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75		
22		27	27			5. Cortificate of Status Desired	Fee Ro		
City & Stat	le	City & State	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution	Added t		
Zip 24	Country Zip 29 30			Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered	d Agent		
HALI	PER, DEAN R		В	Namo)				
15200 JOG RD				2 Stree	t Addres	ss (P.O. Box Number is Not Acceptable)			
SUITE B-7						so (i to: box trainbol to trot / looopidalo)			
DELRAY BEACH FL 33484				3					
				City			85 Zip (Code	
						F1	L ' '		
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent, or both, in the Stat	602 and 607.1508, Florida Statute le of Florida, Such change was a	s, the abo	ve-name	d corpor	ration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its	s registered	
agent. I a	im familiar with, and accept the obli	gations of, Section 607.0505, Flor	rida Statuti	SS.	i polatio	The board of directors. Thereby decoupt the ap	About the tit to	Togistorou	
SIGNATURE							·····		
12.	Signature, typed or printed name of registered a OFFICERS At			gont signatu	re required	ADDITIONS/CHANGES TO OFFICERS AN	UD DIDECTOR	2C IN 10	
TITLE			1.1 T(1LE		T	ADDITIONS/CHANGES TO OFFICENS AT	Change	Addition	
NAME	VIDOOLINGO ACAMICTA		1.2 NAME		Colonies Andrews				
STREET ADDRESS	s 15200 JOG RD			SIREET ADDRESS					
CITY-ST-ZIP				-ST-ZIP					
TITLE	DELETE 2:			01 211	 		Change	Addition	
NAME			2.2 NAME				 ··- ·•-		
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			2 4 CHY					İ	
TITLE		☐ DELE 1E	3 1 TITLE		1		Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS			3 3 STREE	T ADDRESS					
CITY-ST-ZIP			34 CITY	ST-ZIP					
TITLE		DELETE	4 1 TITLE				Change	Addition	
NAME			4 2 NAM						
STREET ADDRESS			4.3 STREE	i address					
CITY-ST-ZIP			4.4 C/TY-	ST-ZIP					
TITLE		DELETE	5.1 TITLE				Change	Addition	
MAME			CONME		1				

14. I do hereby certify that the information supplied with this filling 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 any fullyleport 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 of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or bigch 18 if Quanged, or on an attaching of with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 1ITLE

6.2 NAME

DELETE

OLONIATURE.

STREET ADDRESS

STREET ADDRESS

CHTY-ST-ZIP

CITY-ST-ZIP

TITLE

1/21/97

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FILED

Apr 29 1997 8:00am

Secretary of State