SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION **ANNUAL REPORT**

Principal Place of Business

50 SUN AIR BLVD E

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000004229 (5)

FLORIDA GOLF REALTY INC.

Mailing Address 50 SUN AIR BLVD E HAINES CITY FL 33844

FILED Sep 14 1998 8:00am Secretary of State

HAINES CITY FL 33844	HAINES CITY FL 3	HAINES CITY FL 33844			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
					01/10/1997			ı
Principal Place of Business	2a. Mailing Addre	28. Mailing Address 26 Suite, Apt. #, etc. 27			4. FÉI Númber			Applied For Not Applicable
Suite, Apt. #, etc.	+ 1				5. Certificate of Status Desired	5 Additional Required		
City & State	City & State 28				Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
Zip C- 24 25	ountry 21p	30	ountry		This corporation owes or has personal Property Tax due Jui	_	ent year Yes	Intangible
9. Name and A	Address of Current Registered Agent				10. Name and Address of New F	egistered	Agent	
STINE, JOSEPH A			81	Name				
604 COUNTRY LN N	E	82 Street Add		Street Ad	dress (P.O. Box Number is Not Accepta	(P.O. Box Number is Not Acceptable)		
WINTER HAVEN FL 3	33881							
			84	City		 Fi_	85 Z	ip Code
SIGNATURE	nd accept the obligations of, section 607.0				required when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS	J 1:	3.		ADDITIONS/CHANGES TO OF	FICERS AN	D DIREC	CTORS IN 12
IIILE DIRECT	DE DEL	FTE 1.1	TITLE				Chang	ge [] Addition
NAME JOSEPH	DR A, STINE VINTY LANE NE HAVEN PL 33881	1.2	NAME					
STREET ADDRESS 604 CO	Untry LANENE	13	STREET	ADDRESS				
CITY-ST-ZIP WINTER H	HAVEN FL 3388/_	1.4	CITY-ST	-ZIP				· · · · · · · · · · · · · · · · · · ·
TITLE	[] DEL		TITLE			+	Chang	ge 🔲 Additio
NAME		2.2	NAME					
STREET ADDRESS		Bi .		ADDRESS				
CITY-ST-ZIP			CITYST	-ZIP				
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STREET ADDRESS				ADDRESS				
CITY-ST-ZIP		1	CITYST					
MILE	DEL		TITLE				Chang	ge Addition
NAME	L	4.2	NAME			•		
STREET ADDRESS		4.3	STREET	ADDRESS				
aty-st-zip			CITY-ST	-ZIP				<u></u>
ITLE	[_] DEL	C I C	TITLE				Chang	ge 🔲 Addition
AME			NAME.					
STREET ADDRESS		- 1		ADDRESS				
CITY-ST-ZIP			CITY-ST	-ZIP		- -	-	[
TITLE	L., DEL		TITLE		2000026	apd	Chang	ge Addition
NAME			NAME	1000000	-09/14/9801	134	004	₹V.
STREET ADDRESS				ADDRESS	***158.75			ገ ለነ /
CITY-ST-ZiP		6.4	CITY-ST	-ZIP	and a doubt a d			,

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 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.

Joseph A. Stine 604 Country Lane NE Winter Haven Florida, 33881

Dept. of Corporations,

My Name is Joseph A. Stine. I am writing to you as instructed by one of your employees, L'eslie Sellers in regards to this my second attempt to properly file the 1998 Profit Corporation Annual Report.

I filled out and mailed the first Annual Report Packet and mailed it along with a check #1866 for \$158.75 on 4/30/98. Later I received a second packet labeled 2nd Notice. When I called your office Leslie Sellers informed me that the form was filled out incorrectly and I should have received the returned form and check in the mail with instructions about the correct procedures.

She told me over the phone to write this letter, fill out the second packet, fill in box #12 on the form sign it and send it in with another check for the same amount. Hopefully this attempt at filing will suffice.

If there is a problem with this attempt to file the Annual Report please fill free to call me at 941-293-2621. Thank you for your help and patience.

Sincerely

Joseph A. Stine