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

Mailing Address

STE.C-105

6765 NORTH WICKHAM ROAD

MELBOURNE FL 32940

Suite, Apt. #, etc.

2a. Mailing Address

City & State

28

29

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

MELBOURNE FL 32940

Suite, Apt. #, etc.

City & State

STE.C-105

21

22

23

24

Zip

6765 NORTH WICKHAM ROAD

2. Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #1. Corporation Name P97000007462 (9)

Country

9. Name and Address of Current Registered Agent

25

6765 NORTH WICKHAM ROAD

STONESIFER, BEAL

MELBOURNE FL 32940

STE.C-105

LANDMARK REAL ESTATE, INC.

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/21/1997 Applied For 59-34221 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes □ Ño Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) 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.

FILED

Mar 10 1998 8:00am

Secretary of State

SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE President Change Addition Addition Stonesiter, BeaL STONESIFER, BEAL NAME 1.2 NAME 6765 North Wickham Road, C-105 6765 NORTH WICKHAM ROAD STREET ADDRESS 1.3 STREET ADDRESS MELBOURNE FL 32940 Melbourne, FL CITY-ST-ZIP 1.4 CiTY-ST-ZIP Change TITLE DELETE 2.1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST - ZIP DELFTE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition 52 NAME STREET ADDRESS **53 STREET ADDRESS** 5.4 CITY-ST-21P CITY-ST-ZIP DELETE 61 TITLE Channe Addition TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

Country

81 Name

82

83

84 City

30

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 attrachment with an address.

3/3/98

407-726-6266