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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

TITLE

NAME

STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an address.



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000010910 (2)

SAN MARCO APARTMENTS, INC.

Principal Place of Business Mailing Address 6418 N.W. 97TH COURT 6418 N.W. 97TH COURT GAINESVILLE FL 32653 GAINESVILLE FL 32653 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/04/1997 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 21 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country Zio Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HOLBROOK, JUAN A 6418 N.W. 97TH COURT Street Address (P.O. Box Number is Not Acceptable) GAINESVILLE FL 32653 83 84 Zip Code 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. **SIGNATURE** Signature, typed or printed name of registered agont and title it applicable (NOTL Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 1.1 TITLE TITLE D HOLBROOK, JUAN A 1.2 NAME NAME 6418 N.W. 97TH COURT 1.3 STREET ADDRESS STREET ADDRESS GAINESVILLE FL 32653 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition \_\_\_ DÉLETE 2.1 TITLE TITLE HOLBROOK, LINDA G 2.2 NAME NAME 6418 N.W. 97TH COURT 2.3 STREET ADDRESS STREET ADDRESS **GAINESVILLE FL 32653** CITY-ST-ZIP 2.4 CiTY-S1-ZIP Change Addition DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-7IP CITY-ST-ZIP Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 5.1 TOLLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

DELETE

Mallow

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 supplicmental 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 277

4000025244**8** -05/15/98--01005--003

\*\*\*150.00

Addition

**FILED** 

May 12 1998 8:00am

Secretary of State