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FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000012735 (1)

1. Corporation Name

SOUTHERN PROPERTY SALES & DEVELOPMENT CORPORATIO
N



Principal Place of Business

4205 NW 61ST TERRACE
GAINESVILLE FL 32653

Mailing Address

4205 NW 61ST TERRACE
GAINESVILLE FL 32653

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/07/1997

4. FEI Number

59-3438165

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 100 S.W. 109TH PL.

Suite, Apt. #, etc.

22 City & State

23 Micanopy, FL

24 Zip 32667

Country

2a. Mailing Address

26 4205 N.W. 61ST TERR.

Suite, Apt. #, etc.

27 City & State

28 Gainesville, FL

29 Zip 32606

Country

30

9. Name and Address of Current Registered Agent

MARTIN, G. MICHAEL
RT. 2, BOX 119-B
MICANOPY FL 32667

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

100 S.W. 109TH PL.

83

84 City

FL

85 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 agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MARTIN, G. MICHAEL
STREET ADDRESS RT. 2, BOX 119-B
CITY-ST-ZIP MICANOPY FL 32667

☐ DELETE

TITLE D
NAME VAN ARSDALL, JEANNE H
STREET ADDRESS 4205 NW 61ST TERRACE
CITY-ST-ZIP GAINESVILLE FL 32653

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D MARTIN, G. MICHAEL
1.2 NAME
1.3 STREET ADDRESS 100 S.W. 109TH PL.
1.4 CITY-ST-ZIP MICANOPY, FL 32667

☒ Change ☐ Addition

2.1 TITLE D
2.2 NAME JEANNE H. VAN ARSDALL
2.3 STREET ADDRESS 4205 N.W. 61ST TERR.
2.4 CITY-ST-ZIP GAINESVILLE, FL 32606

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

CR2E034 (10/97)