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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	JMENT # P970(IT AVALON PROPERTIES,	00016426 (3) INC.				
Principal Place of Business 1411 EDGEWATER DRIVE SUITE 101 ORLANDO FL 32804		Mailing Address	Mailing Address		T JOERLAND WALL BALL BALL BALL BALL BALL BALL BALL	, 0111 1001
		1411 EDGEWATER DRIVE SUITE 101 ORLANDO FL 32804			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
					02/20/1997	
2. Principal	Place of Business	2a. Mailing Address	Mailing Address		4 EEI Number	olied For
21		26			1 40 21/2/90H	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		- \$8.75 A	dditional
22		27			5. Certificate of Status Desired Fee Rec	
City & Sto	ate	City & State			Election Campaign Financing \$5.00	
23 Zin	Country	7/2	Coveter		Trust Fund Contribution Added to	
Zip 24	Country Zip 25 29 30		Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		. •
24	p. Name and Address of Cui		501		10. Name and Address of New Registered Agent	1110
ш	EWITT, ROBERT W		81 N	lame	10.	
	111 EDGEWATER DRIVE					
	UITE 101		82	Street Addres	ss (P.O. Box Number is Not Acceptable)	
7.	RLANDO FL 32804		83	_		
	10 1100 12 02007					
	•		84 0	Dity	FL 85 Zip C	ode
11. Pursuar office or agent. I	nt to the provisions of Sections 607, r registered agent, or both, in the Si am familiar with, and accept the of	0502 and 607.1508, Florida Sta tules tate of Florida. Such change was au oligations of, Section 607.0505, Flori	s, the above-nathorized by the ida Statutes.	amed corpo e corporatio	ration submits this statement for the purpose of changing its n's board of directors. I hereby accept the appointment as r	registered egistered
SIGNATURE	Classitus broad or printed many of societies	Toggit and title if poolingting	Posistavad Agart s	analysa required	when reinstaling) DATE	
Signature, typod or printed name of registered agent and little if applicable 12. OFFICERS AND DIRECTORS			E Registered Agent signature require 13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
TITLE	President	☐ DELET E	1.1 TITLE		☐ Change	Addition
NAME	Robert W Havitt		1.2 NAME			
STREET ADDRESS			1.3 STREET ADD	ORESS		
CITY-ST-ZIP	Orlando, Fr. 32864		1.4 CITY-ST-ZIP			
TITLE		DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME			2.2 NAME			
STREET ADDRESS	3		2.3 STREET ADD	DRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS	S		3.3 STREET ADE	RESS		
CITY-ST-ZIP		Libriese	3.4. CITY-ST-ZIP			Again-
TITLE		DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS	8		4.3 STREET ADD			
CITY-ST-ZIP TITLE	 	DELETE	4.4 CITY-ST-ZI 5.1 TITLE	P	Change	☐ Addition
CITE L	4		■ V.I IIII.C.		Change	

6.4 CITY-ST-ZIP 14. Thereby 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 13 if changed, or on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

11-2168

Change

Addition

FILED

Feb 18 1998 8:00am

Secretary of State