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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000024656 (5)

DELTA AUCTION AND REAL ESTATE COMPANY, INC.

Principal Place of Business

Mailing Address

## FILED Apr 23 1998 8:00am Secretary of State



.12310 WINDSTREAM LANE 12310 WINDSTREAI JACKSONVILLE FL 32258 JACKSONVILLE FL						
• • • • • • • • • • • • • • • • • • • •				DO NOT WRITE IN THI	S SPACE	·····
				3. Date Incorporated or Qualified 03/13/1997		
_	ace nt Rusiness	2a. Mailing Address	Tana Rline	4. FEI Number		plied For
21 Suite, Apt.		26 / 000 / San J Suite, Apt. #, etc.	ose Blua	430 x 3 x 3 x 1	\$8.75 A	t Applicable
22	106	27 /06		5. Certificate of Status Desired	Fee Re	quired
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	<b>\$5.00</b> Added t	•
Zip	Country	Zip	Country	8. This corporation owes or has paid the o		
24 322E	57 25	29]3	0	Personal Property Tax due June 30.	🔲 Yes 🔉	No
	9. Name and Address of Current Re	gistered Agent		10. Name and Address of New Registere	d Agent	
CASTO, DALE L 81 Name ) ale CASTO						
-	310 WINDSTREAM LANE		82 Street Ad	dress (P.O. Box Number is Not Acceptable)	/	
JAI	CKSONVILLE FL 32258		83	10 COMA STREAM	Lane	
			84 City J	Acksonii lle F	ا 85 Zip C	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 diapplicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.	Signature, typed or printed name of registured again and OFFICERS AND DI	<del></del>	Hegistered Agent signature req	ured when reinstating)  ADDITIONS/CHANGES TO OFFICERS A		S IN 12
TITLE	D	DELETE	1.1 TITLE	ADDITIONS OF A TOUR TO SEE TO	Change	Addition
NAME	JONES, JASPER E	_	1.2 NAME		_ •	
STREET ADDRESS	2850 AUSTIN P. HWY, SUITE 10	10	1.3 STREET ADDRESS			
CITY-ST-ZIP	MEMPHIS TN 38128		1.4 CITY-ST-ZIP			
TITLE	D DATE DATE	DELETE	2.1 TITLE		L Change	Addition
NAME	CASTO, DALE L 12310 WINDSTREAM LANE		2.2 NAME			
STREET ADDRESS	JACKSONVILLE FL 32258		2 3 STREET ADDRESS			
CITY-ST-ZIP	MACAGOITHILLE PE 32200	DELETE	2.4 CITY-ST-ZiP 3.1 TITLE		Change	Addition
NAME		CJ vice it	3.2 NAME		Onlings	
STREET ADDRESS			3,3 STREET ADDRESS		,	
CITY-ST-ZIP			3.4 CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		DC) ETC	4.4 CITY-ST-ZIP		Character	Addition
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS			
CITY-ST-ZIP			5 4 City-St-Zip			
TITLE		DELETE	61 TITLE	· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			62 NAME		-	
STREET ADDRESS			6.3 STREET ADORESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			
<ol> <li>14. I hereby control indicated of</li> </ol>	ertify that the information supplied with the on this annual report or supplied ental an	his filing does not qualify for the number of accurrance and accur	the exemption stated in ate and that my signat	n Section 119.07(3)(i), Florida Statutes. I further ture shall have the same legal effect as if made	certify that the under oath: the	information ]
officer or o	director of the corporation or the receiver or Block 13 if changed, or on/an attachro	r en∡fuste of empowered to ex	ecute this report as re-	quired by Chapter 607, Florida Statutes; and tha	it my name app	bears in