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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** P97000046099 (2) Corporation Name
MEDALLION REALTY, INC.

Mailing Address	
1609 BALIHAI COURT GULF BREEZE FL 32561	
	1609 BALIHAI COURT

Mar 09 1998 8:00am Secretary of State

Principal Plac	ce of Business	Mailing A	ddress			3 1601/1631 (16 16/1) (1001/1 00/1) 00/1/ 00/1/ 00/1/ 00/1/		1010 1011 1001
1609 BALIHAI COURT 1609 BALIHAI COURT								
GULF BREEZ	E FL 32581	GULF BR	EEZE FL 32561					
						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified 05/23/1997		
	Place of Business	2a. Mailing	g Address			4. FEI Number	A	pplied For
Suite, Apt.	H ab	26				59-3449241		ot Applicable
22 Suite, Apr.	. W. etc.	<u> </u>	Apt. #, etc.			5. Certificate of Status Desired		Additional
City & Stal	le .	27 City 8	State	···			<del></del>	equired
23		<u> </u>	Diate			6. Election Campaign Financing Trust Fund Contribution	•	May Be
Zip	Country	[28]   Z <sub>(P</sub>	<del></del>	Countr	,			to Fees
24	25	29		30		<ol> <li>This corporation owes or has paid the or Personal Property Tax due June 30.</li> </ol>		tangible I No
	9. Name and Address of Curren			30		10. Name and Address of New Registered		
PA	LMER, RAYMOND B		<del></del>	81	Name			
	3 GULF BREEZE PARKWAY				s	andra L. Franz dress (P.O. Box Number is Not Acceptable)		
	ITE 41			82				
	JLF BREEZE FL 32561			83	1	609 Balihai Ct.		
-								
				64	City	ule Broom Et Fi	<b>85</b> Zip	Code
11. Pursuant	to the provisions of Sections 607 050	2 and 607 1508	Florida Statute	e the show	e-named co	propration submits this statement for the purpose ration's board of directors. I hereby accept the appropriate the submits the	<u> </u>	2561
office or	registered agent, or both, in the State	of Florida Suct	n change was a	uthorized by	y the corpor	ration's board of directors. I hereby accept the ap	pointment as	registered
agent ra	ani tamilihir with, and accept the congr	ations of, Section	n 607.0505, Flo	rida Statute	<b>S</b> .			i
SIGNATURE	Signature, typed or printed name of registered age	<i>m</i>	le (NOTE	Sandra	L. Fr	anz, President DATE	3/3/98	
12.	OFFICERS ANI		(1407)	13.	on argulatore ret	ADDITIONS/CHANGES TO OFFICERS AN		RS IN 12
TITLE			DELETE	1.1 TITLE			Change	Addition
NAME				1.2 NAME		President		
STREET ADDRESS				1.3 STREET	ADDRESS	Sandra L. Franz		
CITY - ST - ZIP				1.4 CITY - 5	I	1609 Balihai Ct. Gulf Breeze, FL 32561		
TITLE			DELETE	2.1 TITLE		Guil Breeze, FL 32301	Change	Addition
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREET	ADDRESS			
CITY+ST-ZIP				2. 4 CITY -				
TITLE			DELETE	3.1 TITLE	5)-211		Change	Addition
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP				3.4. CiTY-1	- 1			
TITLE			DELETE	4.1 TITLE	· <u></u> "		Change	Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-S				1
TITLE			DELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAME	1	•		
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY+ST-ZIP				5.4 CITY - S				
TITLE		**	DELETE	6 1 TITLE	4"		Change	Addition
NAME				6.2 NAME			- Principo	
STREET ADDRESS				6.3 STREET	ADDRESC			
				6.4 CITY-S				

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 roport or supplemental annual roport 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 chapped, or on an allactagent with an address.

Sandra L. Franz, President 3/3/98 (850) 932-5064