## 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 #** P97000049439 (7)

GHD REALTY, INC.

Principal Place of Business

Mailing Address

**FILED** Mar 12 1998 8:00am Secretary of State



STE. 1, 5117 CASTELLO DR. STE. 1. 5117 CASTELLO DR. NAPLES FL 34103 NAPLES FL 34103 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/04/1997 Applied For 2. Principal Place of Business 2a. Mailing Address 52-2043710 Not Applicable 21 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Ζip Country 8. This corporation owes or has paid the current year Intangible Zip Country Yes □ No Personal Property Tax due June 30. 24 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name AMBURN, JAMES STE. 1, 5117 CASTELLO DR. Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 34103 83 Zip Code 84 City 85 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 Horida. 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 DATÉ Signature, typed or printed name of registered agent and little P applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition Change DELETE 1.1 TITLE TITLE 1.2 NAME DRESTE, HEINZ NAME STE. 1, 5117 CASTELLO DR. 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 34103 CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition Change DELETE 21 TITLE TITLE DRESTE, GERTRAUDE 22 NAME NAME STE. 1, 5117 CASTELLO DR. 2.3 STREET ADDRESS STREET ADDRESS NAPLES FL 34103 2 4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 31 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP Addition Change DELETE 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 suppliemental 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 exclude 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

SIGNATURE:

February 1998

SIGNATURE: