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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000055230 (1) DOCUMENT #

FINNEY'S REAL ESTATE FIRM, INC.

## **FILED** Apr 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2304 S.W. 2ND AVE. 2304 S.W. 2ND AVE.					1	,4 00101 01440 170 <b>0</b>	A (IIII BBII I <b>ii</b> i
OKEECHOBEI		2304 S.W. 2ND AVE. OKEECHOBEE FL 3497	4				
		***************************************			DO NOT WRITE IN TH	HIS SPACE	
					<ol> <li>Date Incorporated or Qualified 06/23/1997</li> </ol>		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26		_	65-0777408		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	•	5 Additional Regulred
City & State	е	City & State			6. Election Campaign Financing	\$5.0	00 May Be
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the	current year	Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes	□No
	<del></del>	f Current Registered Agent			<ol><li>Name and Address of New Register</li></ol>	ed Agent	
	iney, thomas a		81	Name			
	04 S.W. 2ND AVE. IEECHOBEE FL 34974		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
<b>U</b> (1)	MENTONE IL VIVII		83				
			-				<del></del>
			84	City	F	=L   <sup>85</sup>   <sup>2</sup>	ip Code
11. Pursuant	to the provisions of Sections	607.0502 and 607.1508, Florida State	utes, the above	named corp	poration submits this statement for the purpos	e of changin	g its registered
office or re	<b>register</b> ed agent, or both, in t	he State of Florida. Such change was he obligations of, Section 607.0505, F	authorized by	the corpora	tion's board of directors. I hereby accept the	appointment	as registered
-	The state of the s	To obligation of cooler con cool	ionaa olaloloo.				
SIGNATURE	Signature, lyped or printed name of reg	pistered agent and total flapplicable (NC	DTE Registered Agen	il signature requi	ired when reinstating) DAT	lE .	<del></del>
12.		ERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	DELET <b>E</b>	1.1 TITLE			Chang	ge 🔲 Addition
NAME	FINNEY, THOMAS A		1.2 NAME				
STREET ADDRESS	2304 S.W. 2ND AVE.		1.3 STREET A	ADDRESS			
CITY-ST-ZIP	OKEECHOBEE FL 349	74	14 CHY-ST	- ZIP			
TITLE		☐ DELETE	21 TITLE			Chang	ge Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET A	ADDRESS			
CITY-ST-ZIP			2.4 CITY-S1	1-2IP			
TITLE		☐ DELETE	3.1 TITLE			Chang	ge Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET A	NDDRESS			
CITY-ST-ZIP			3.4. CITY-ST	- Z(P			
TITLE		☐ DELET <b>E</b>	4.1 TITLE			Chang	ge 🔲 Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET A	ADDRESS			
CITY-ST-ZIP	- · · <del>-</del> ·		4.4 CITY-ST	- ZIP			
TITLE		DELETE	5.1 TITLE			Chang	e Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET A	NODRESS			
CITY-ST-ZIP			5.4 CITY - ST	-7IP			
TITLE		DELETE	6.1 TITLE			Chang	ge 🔲 Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET A	ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST				
14. I hereby of indicated	certify that the information sup on this annual report or super	optied with this filing does not qualify	for the exemption	on stated in	Section 119.07(3)(i), Florida Statutes. I furthe ire shall have the same legal effect as if made	r certify that t	the information
officer or o	director of the corporation or	the receiver or trustee empowered to an attachment with an address.	execute this re	eport as req	uired by Chapter 607, Florida Statutes; and th	iat my name	appears in