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Apr 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000058999 (8)

1. Corporation Name

FLORIDA REALTY CONNECTION, INC.



Principal Place of Business

Mailing Address

2940 SOUTH MIAMI TRAIL
SARASOTA FL 34239

2940 SOUTH MIAMI TRAIL
SARASOTA FL 34239

2940 SOUTH TAMiami TRAIL
SARASOTA, FL. 34239

2940 SOUTH TAMiami TRAIL
SARASOTA, FL. 34239.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 2940 SOUTH TAMiami TRAIL

26 2940 SOUTH TAMiami TRAIL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 SARASOTA, FL

28 SARASOTA, FL

Zip

Country

Zip

Country

24 34239

25 USA

29 34239

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JUDD, STEVEN H
2940 SOUTH MIAMI TRAIL
SARASOTA FL 34239

81 Name

JUDD, STEVEN H.

82 Street Address (P.O. Box Number is Not Acceptable)

2940 SOUTH TAMiami TRAIL

83

84

City SARASOTA

FL

85 Zip Code

34239

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

0

DELETE

NAME

KULLEY, CINDY

STREET ADDRESS

5226 PALOS VERDES DRIVE

CITY - ST - ZIP

SARASOTA FL 34231

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I hereby 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Cindy Kulley

KINDY KULLEY

4/8/98

(941) 923-4075

CR2E034 (10/97)