

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

FILED
Mar 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000065490 (9)

1. Corporation Name
MALABAR ACRES, INC.

Principal Place of Business

2460 MALABAR ROAD
MALABAR FL 32950

Mailing Address

2460 MALABAR ROAD
MALABAR FL 32950



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/29/1997

4. FEI Number

65-0773519

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24

2a. Mailing Address

26 486 ALAMANDA AVE

27 Suite, Apt. #, etc

28 SEBASTIAN FL.

29 32958 30 USA

9. Name and Address of Current Registered Agent

SHEPARD, THOMAS
2460 MALABAR ROAD
MALABAR FL 32950

10. Name and Address of New Registered Agent

81 Name SHEPARD, THOMAS (SAME)
82 Street Address (P.O. Box Number is Not Acceptable)
486 ALAMANDA AVE
83 SEBASTIAN FL.
84 City FL 85 Zip Code 32958

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 607.0502, Florida Statutes.

SIGNATURE THOMAS SHEPARD

Thomas Shepard

3.03.98

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	SHEPARD, THOMAS	
STREET ADDRESS	2460 MALABAR ROAD	
CITY-ST-ZIP	MALABAR FL 32950	
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 T. F. SHEPARD

T. F. Shepard

3.13.98 407-248-7797

CR2E034 (10/97)