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FILED

Apr 08 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000067366 (9)**

1. Corporation Name  
**CURTIS POLAND REALTY, INC.**

Principal Place of Business

**800 VIRGINIA AVENUE  
SUITE 14C  
FORT PIERCE FL 34982**

Mailing Address

**800 VIRGINIA AVENUE  
SUITE 14C  
FORT PIERCE FL 34982**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**08/01/1997**

4. FEI Number

**65-0766894**

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 **18640 SW 296 ST**

Suite, Apt. #, etc.

22 **Homestead, FL**

City & State

23 **33030**

Zip

Country

24 **DADE**

2a. Mailing Address  
25 **18640 SW 296 ST**

Suite, Apt. #, etc.

27 **Homestead, FL**

City & State

28 **33030**

Zip

Country

29 **DADE**

City & State

10. Name and Address of New Registered Agent

81 Name

**Poland Curtis**

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

**18640 SW 296 ST**

83

84 City

**Homestead**

FL

85 Zip Code

**33030**

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 **D**  
NAME **POLAND, CURTIS**  
STREET ADDRESS **800 VIRGINIA AVENUE, SUITE 14C**  
CITY-ST-ZIP **FORT PIERCE FL 34982**

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Poland Curtis** ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS **18640 SW 296 ST**

1.4 CITY-ST-ZIP **Homestead, FL 33030**

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:

*Curtis Poland*

4.2.98 305.748-3610

CR2E034 (10/97)