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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9800003038

FAULK AND ASSOCIATES REALTY, INC.

Principal Place of Business 786 N BEAL PARKWAY. SUITE 78 FT WALTON BEACH FL 32547 Mailing Address

786 N BEAL PARKWAY. SUITE 7B FT WALTON BEACH FL 32547

## FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90180 046 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

						3. Date Incorporated or Qualif	eu		
						01/12/1998			
2. Principal Pla	ace of Business	2a. Mailing Add	dress	-		4. FEI Number		<u> </u>	olied For
21		26				59-34880	12	Not	Applicable
Suite, Apt. #	ŧ, etc.	Suite, Apt.	#, etc.			5. Certifcate of Status Desired		<b>\$8.75</b> A Fee Re	
City & State	, -	City & Stat	e			6. Election Campaign Financia	na _	\$5.00	May Be
28		—	າ ໌			Trust Fund Contribution Added to Fees			•
Zip	Country	Zip		Country		8. This corporation owes the o	current vear Ir	ntangible	
24	25	29	30			Personal Property Tax.	,	Yes	No
9. Name and Address of Current I			<del></del>			10. Name and Address of New Registered Agent			
				81 N	lame				
FAUL	K, ALLEN M						. (1-)		
1003 27TH ST			82 Si		Street Address (P.O. Box Number is Not Acceptable)				
	VILLE FL 32547								
HICL	VILLE I E 02047			83					
					City		FI		
office or re	o the provisions of Sections 607.05 egistered agent, or both, in the State in familiar with, and accept the oblig	e of Florida. Such cha	inge was authori	zea by the	amed corpo corporatio	oration submits this statement for on's board of directors. I hereby ac	the purpose occept the app	of changing its ointment as re	registered gistered
SIGNATURE ,	Signature, typed or printed name of registered ag-	ent and title if applicable	(NOTE: Registr	ered Agent sid	nature required	d when reinstating)	DATE		
12.						ADDITIONS/CHANGES TO	OFFICERS A	ND DIRECTO	RS IN 12
		NO DIRECTORS	1	13.			O		
		ND DIRECTORS		13. .1 TITLE	ViC		0.1702710	Change	X Addition
TITLE	D		DELETE 1.	1 TITLE	V 10	CE PRESIDENT			X Addition
TITLE NAME	D FAULK, ALLEN M		DELETE 1.	.1 TITLE .2 NAME	A	CE PRESIDENT			<b>X</b> Addition
TITLE NAME STREET ADDRESS	D FAULK, ALLEN M 786 N BEAL PARKWAY, SUITI	□ E 7B	DELETE 1. 1. 1.	1 TITLE 2 NAME 3 STREET AD	DRESS 10	CE PRESIDENT INNA M. HALEY OG LINDA COURT			<b>⊠</b> Addition
NAME STREET ADDRESS CITY-ST-ZIP	D FAULK, ALLEN M	□ E 7B 7	DELETE 1. 1. 1. 1.	1 TITLE 2 NAME 3 STREET AD 4 CITY-ST-ZI	DRESS 10	CE PRESIDENT INNA M. HALEY OG LINDA COURT SICEVILLE. FL 32:	578	Change	
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	D FAULK, ALLEN M 786 N BEAL PARKWAY, SUITI	E 7B 7	DELETE 1. 1. 1. 1. DELETE 2 2 2 2	1 TITLE 2 NAME 3 STREET AD 4 CITY-ST-ZI 1 TITLE 2 NAME 3 STREET AD 4 CITY-ST-ZI	DRESS 10 P PR	CE PRESIDENT  LINDA M. HALEY  OG LINDA COURT  LICEVILLE, FL 32:  ESIDENT, SECRETARY	578 Tefasun	☐ Change	<b></b> Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	D FAULK, ALLEN M 786 N BEAL PARKWAY, SUITI	E 7B 7	DELETE 1. 1. 1. 1. DELETE 2 2 2 2	.1 TITLE 2 NAME 3 STREET AD 4 CITY-ST-ZI .1 TITLE .2 NAME .3 STREET AD	DRESS 10 P PR	CE PRESIDENT INNA M. HALEY 106 LINDA COURT ILCEVILLE, FL 32: ESIDENT, SECRETARY 11EN M. FAULK 1003 27th STREET	578 Tefasun	Change	<b>⊠</b> Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	D FAULK, ALLEN M 786 N BEAL PARKWAY, SUITI	E 7B 7	DELETE 1. 1. 1. 1. DELETE 2 2 2 DELETE 3	1 TITLE 2 NAME 3 STREET AD 4 CITY-ST-ZI 1 TITLE 2 NAME 3 STREET AD 4 CITY-ST-ZI	DRESS 10 P PR	CE PRESIDENT INNA M. HALEY 106 LINDA COURT ILCEVILLE, FL 32: ESIDENT, SECRETARY 11EN M. FAULK 1003 27th STREET	578 Tefasun	☐ Change	<b>⊠</b> Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	D FAULK, ALLEN M 786 N BEAL PARKWAY, SUITI	E 7B 7	DELETE 1. 1. 1. 1. DELETE 2 2 2 DELETE 3 3	1 TITLE 2 NAME 3 STREET AD 4 CITY-ST-ZI 1 TITLE 2 NAME 3 STREET AD 4 CITY-ST-Z 1 TITLE	DRESS 10 PROPERTY A PR	CE PRESIDENT INNA M. HALEY 106 LINDA COURT ILCEVILLE, FL 32: ESIDENT, SECRETARY 11EN M. FAULK 1003 27th STREET	578 Tefasun	☐ Change	<b>⊠</b> Addition
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	D FAULK, ALLEN M 786 N BEAL PARKWAY, SUITI	E 78 7	DELETE 1. 1. 1. 1. DELETE 2 2 2 DELETE 3 3 3 3	3 TITLE 2 NAME 3 STREET AD 4 CITY-ST-ZI 1 TITLE 2 NAME 3 STREET AD 4 CITY-ST-Z 1 TITLE 2 NAME 3 STREET AD 5 STREET AD 5 STREET AD 5 STREET AD 6 STREET AD	DRESS 10 PR. A / DORESS 10 PR.	CE PRESIDENT INNA M. HALEY 106 LINDA COURT ILCEVILLE, FL 32: ESIDENT, SECRETARY 11EN M. FAULK 1003 27th STREET	578 Tefasun	☐ Change	Addition ☐ Addition
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4. 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 informatic 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 trustes 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 en attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED UN PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-99

850 864 330

Daytime Phone

R2E034 (11/98)