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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P98000033923

LAHAINA REALTY, INC.

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90101 017 ***150.00



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Principal Place	e of Business	Mailing Address	•				f 300ts#Ar som tmomt smest maste na	III DBIH BBIBD	ITIMB [*] HILLM LEHILM	itané un tant
6035 ESTERO BLVD. 6035 ESTERO BLVD. FT. MYERS BEACH FL 33931 FT. MYERS BEACH FL 33931										
FI. MIERS BEAUTIFE 33331							DO NOT WRITE IN THIS SPACE			
	, .						 Date Incorporated or Qualified 04/14/1998 			
2 Principal P	lace of Business	2a. Mailing Address					4. FEI Number		Ar	plied For
21	26					65-0841287		_ 	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 / Fee Re	l l
22 27 City & State							6. Election Campaign Financing		\$5:00	May Ro
23 28							Trust Fund Contribution		Added	
Zip	Zip	Country				8. This corporation owes the cur	rent vear Inta	angible		
24	Country Zip 25 29			30			Personal Property Tax.			
	9. Name and Address of Curr	ent Registered Agent					10. Name and Address of New	Registered A	Agent	
				81	Name					
TITUS, JESSICA L 6035 ESTERO BLVD.					Street	Addres	ss (P.O. Box Number is Not Accept	able)		
	MYERS BEACH FL 33931		_							
F1.1	WIERS DEMOTTE 30931			83						
ļ				84	City			FL	85 Zip	Code
l office or r	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was a gations of, Section 607.0505, Flo	uthorized irida Statu	by ites.	the corpo	oration	ation submits this statement for the 's board of directors. I hereby acce	pt the appoi	ntment as re	gistered
40	Signature, typed or printed name of registered a		: Registered	Agen	t signature i	required v	when reinstating) ADDITIONS/CHANGES TO OF		D DIRECTO	DRS IN 12
12.	PDST	AND DIRECTORS	_	1.1 TITLE		PD		1100110711	Phange	Addition
NAME	TITUS, JESSICA		1.2 NA			ما	GOICH L. TITUS		· V	_
STREET ADDRESS			- F	1.3 STREET ADDRESS		30	sem wore why			
CITY-ST-ZIP	FT. MYERS BEACH FL 3393	1	1.4 CITY-ST-ZIP			C	MUTERS BCH, FI	3393	1	Ì
TITLE	TI. MITCHO DESCRITTE COOD	DELETE	2.1 TITLE			V			☐ Change	☐ Addition
NAME			2.2 NA	ME			WENT E. TITUS			
STREET ADDRESS	■ Till		2.3 ST				Seminore Way			
CITY-ST-ZIP	2.4		2. 4 CI	2.4 CITY-ST-ZIP		E	MUSES BEACH !	7 339	31	
TITLE .		. DELETE	E .2 3.1 TITLE			m : ·	7		Change	- 🔲 Addition
NAME	32 N		3.2 NA	ME						l
STREET ADDRESS			3.3 ST	REET	ADDRESS					
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NAME			4. 2 NAMI							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				_	T-ZIP				☐ Change	Addition
TITLE		☐ DELETE	5.1 TIT 5.2 NA							☐ vocurion
NAME					ADDRESS					
STREET ADDRESS			5.4 CI							
CITY-ST-ZIP TTILE	-	☐ DELĒTE	6.1 TIT		1 - CIF				☐ Change	Addition
		C OCTAIL	6.2 NA							
NAME STREET ADORESS					ADDRESS					
STREET ADDRESS			64 CD							

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 comporation 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, with all other like empowered.

SIGNATURE:

941-463-5703