SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

AMOUNT DUE ON OR SEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

MENDED* 1999 DOCUMENT #

P98000056681 **AMENDED**

KEOGH & THORPE REAL ESTATE SERVICES, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

FILED

99 OCT -4 PH 3: 54

SECRETULE OF STATE TALLABASESE, FLORIDA

|--|

(561) 622-3441

700 U.S. HIGHWAY ONE #G NORTH PALM BEACH FL 33408		700 U.S. HIGHWAY ONE #G NORTH PALM BEACH FL 33408		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/24/1998	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For	
21 11456	U.S. Highway One	26 11456 U.S. I	Highway One	65-0853879 Not Applicable	
Suite, Apt #		Suite, Apt. #, etc.		Certificate of Status Desired \$8.75 Additional Fee Required	
Cily & State	· · · · · · · · · · · · · · · · · · ·	City & State		6. Election Cempaign Financing \$5.00 May Be	
	Beach Gardens, FL	28 Palm Beach (Gardens, FL	Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year	
24 33410	25 USA	29 33410	30 USA	Intangible Personal Property Yes 🔼 No	
9 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
EDGAR, CHARLES W III David E. Horvath, Esq.					
LEVI	NE, FRANK, EDGAR & TELEPMA	N, P.A.	82 Street	Address (P.O. Box Number is Not Acceptable) 95 N. Military Trail, Suite A	
3300 PGA BOULEVARD - SUITE 500 PALM BEACH GARDENS FL 33410					
Palm Beach Gardens, FL 85 Zio Code 33410					
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 suthorized 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 David E. Horvath 9/2/99					
SIGNATURE & SIGNATURE David E. Horvath 9/2/99					
Suprature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D CONTROL OFORCE (XX DELETE	1.1 TITLE	Change Addition	
NAME	CRAVENS, GEORGE K		12 NAME		
STREET ADDRESS CITY-ST-ZIP	700 U.S. HIGHWAY ONE #G NORTH PALM BEACH FL 3340	3	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	7000030187077	
TIT_E	D	DELETE	2.1 TITLE	18/19/93 01073 006 *****61.25 -******61.25	
NAME	Thorpe, Stephen D		2.2 NAME	1 ************************************	
STREET ADDRESS	700 U.S. HIGHWAY ONE #G		2.3 STREET ADORESS		
CFT+S1-ZIP	NORTH PALM BEACH FL 3340	8	2.4 C(TY-ST-ZIP		
NAME		DELETE	3.1 TITLE 3.2 NAME	P/S/D Change X Addition	
STREET ADDRESS			3.3 STREET ADDRESS	Kéogh, John 11456 U.S. Highway One	
CITY ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	Palm Beach Gardens, FL 33410	
NAME		- Deceie	42 NAME	C cusulta C voonou	
STREET ADDRESS			4.3 STREET ADDRESS		
101-51-2-8		_	4.4 CITY-ST-ZIP		
nr.		DELETE	5.1 TITLE	Change Addition	
HAM!			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
DITH ST-ZIP			5.4 CITY-ST-ZIP		
TOT. E		DELETE	6.1 TITLE	Change Addition	
E(A)4			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITESTIZE			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.					

John Keogh

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR