

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

FILED  
May 05, 1999 8:00 am  
Secretary of State

05-05-1999 90020 037 \*\*\*158.75

DOCUMENT # P98000062967

1. Corporation Name  
FREE RENT FINDERS REALTY, INC.



Principal Place of Business  
2250 PALM BEACH LAKES BLVD #116  
PALM BEACH LAKES FL 33409

Mailing Address  
2250 PALM BEACH LAKES BLVD #116  
PALM BEACH LAKES FL 33409

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/16/1998

4. FEI Number

65-0680815

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 the current year Intangible  
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 2727 OKEECHOBEE Blvd.

Suite, Apt. #, etc.

2a. Mailing Address

27 SAME

Suite, Apt. #, etc.

City & State

23 WPB., FL

City & State

28

Zip

24 33409

Country

25 USA

Zip

29

Country

30

9. Name and Address of Current Registered Agent

MORSE, ELEANOR  
7433 ROCKBRIDGE CIR  
LAKE WORTH FL 33467

10. Name and Address of New Registered Agent

81 Name TIM QUINN  
82 Street Address (P.O. Box Number is Not Acceptable)  
110 YACHT CLUB WAY # 207  
83  
84 City Hypoluxo, FL 85 Zip Code 33462

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]*

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	MORSE, ELEANOR	7433 ROCKBRIDGE CIRCLE	LAKE WORTH FL 33467	<input checked="" type="checkbox"/>
V	BEAM, DOROTHY	39 N HARBOUR DR	OCEAN RIDGE FL 33435	<input checked="" type="checkbox"/>
S	QUINN, DEBRA	2433 SOUTHRIDGE RD	DELRAY BEACH FL 33444	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
P	TIM QUINN	110 YACHT CLUB WAY # 207	HYPOLUXO, FL. 33462	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/99

CR2E034 (11/98)

0326978