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 # P98000072291 1. Corporation Name

ESCAROSA REALTY, INC.

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90106 008 ***150.00



Principal Place of Business	Mailing Address				10010 11412 11010		
4368 CASA GRANDE COURT	4368 CASA GRANDE COURT						
MILTON FL 32583	MILTON FL 32583			DO NOT WRITE IN THI	S SPACE		
				3. Date Incorporated or Qualifed			
				08/17/1998			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For	
21 10706 N 946 AVENUE	. 26			59-3527684	No	ot Applicable	
Suite, Apt. #, etc. 22 Suite A-4	Suite, Apt. #, etc.			5. Certifcate of Status Desired	Status Desired Status Desired Fee Required		
City & State	City & State			6. Election Campaign Financing		May Be	
23 Pensacola FL	28			Trust Fund Contribution	Added	to Fees	
Zip Country	Zip	Country		8. This corporation owes the current year Ir		No	
24 32504 25 USA	29 30	<u> </u>		Personal Property Tax.	Yes	=1140	
9. Name and Address o	f Current Registered Agent	81	Name	10. Name and Address of New Registered	Agent		
WIEDLE, VICTORIA D		Ľ	Namo				
4368 CASA GRANDE COURT		82	Street Addi	ress (P.O. Box Number is Not Acceptable)		. 1	
MILTON FL 32583		83					
MIL! 011 / C 02000							
		84	City	E1	85 Zip	Code	
44.0	COT 0502 and COT 1509 Florida Statutos	the above	o comed com	poration submits this statement for the purpose of	of changing its	registered	
office or registered agent, or both, in the	he State of Florida. Such change was auth he obligations of, Section 607.0505, Florid	iorized by	the corporation	on's board of directors. I hereby accept the appoint	ointment as re	igistered	
SIGNATURE				ed when reinstating) DATE	-	· \	
Signature, typed or printed name of reg	pistered agent and title if applicable. (NOTE: Re	13.	nt signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12	
TITLE President	DELETE	1.1 TITLE			Change	Addition	
1	1.11a Ma	1.2 NAME					
STREET ADDRESS 421-1 00.50	VICTOVIA D. WIRATE,		T ADDRESS				
STREET ADDRESS 4361 CASA	70 C 2	14 CITY-S	1				
TITLE M. I TATO	DELETE 2.1TI		·		Change	☐ Addition	
NAME		2.2 NAME	-			}	
STREET ADDRESS			TADORESS		•		
		2.4 CITY-S				1	
CITY-ST-ZIP TITLE	DELETE 3.1				Change	Addition	
NAME		32 NAME				Ì	
STREET ADDRESS			TADDRESS				
CITY-ST-ZIP		3.4. CITY-S					
TITLE	☐ DELETE 4.17				Change	Addition	
NAME		4. 2 NAME					
STREET ADDRESS		43 STREE	T ADDRESS				
CITY-ST-ZIP		4.4 CITY-S					
TITLE	☐ DELETE	5.1 TITLE			☐ Change	Addition	
NAME		5.2 NAME					
STREET ADDRESS		53 STREE	T ADDRESS				
CITY-ST-ZIP		5.4 CITY-S	T-ZIP				
TITLE	☐ DELETE	6.1 TITLE			Change	Addition	
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREE	TADORESS				
		6.4 CITY-S	!			ļ	
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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE: