## 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 # P98000073486

CARLTON REALTY, INC.

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

03-06-1999 90011 003 \*\*\*150.00



Principal Place	e of Business	Mailing Address			10000
19700 BEACH ROAD 19700 BEACH ROAD					
JUPITER ISLAND FL 33469 JUPITER ISLAND FL 33469				DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualifed	
				08/21/1998	
2. Principal Pl	ace of Business	2a. Mailing Address	7.0	4. FEI Number	Applied For
21 8000	ON. AIA	26 8000 N.	HIH	05-08585 98	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
22		27		<u> </u>	
City & State	Beach Fr	28 Vero Blac		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
$     \begin{array}{c cccccccccccccccccccccccccccccccc$				8. This corporation owes the current year In Personal Property Tax.	ntangible ☑Xes □No
Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent					
SIMPSON R MASON  81 Name Philippe Jeck, Esquire					
82 Street Address				hdres no. Box Number is Not Acceptable)	
19/00 BEACH RUAD				Jeck, Harris & Jones, LLP	<u></u>
JUPITER ISLAND FL 33469				l E. Indiantown Rd. Suite	
			84 Citu		85 Zin Code
			Jup	iter FI	<b>L</b> 33477-
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-name' corporation submits this statement for the purpose of changing its registered of 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 the bulgation of the state of Florida Statutes.					
	III lamilla with a second				5/99
SIGNATURE	Significate, tyr 10 or printed have of regist red age	ent and title if applicable (NOTE: Re	egistered Agent signature req	Jeck, Esquire / Augured when reinstating)	<u> </u>
12.	OFFICERS AI	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1.1 TITLE	P/T/S/D	Change X Addition
NAME	SIMPSON, R. MASON		1.2 NAME	2+ C. 1./1	
STREET ADDRESS	19700 BEACH ROAD		1.3 STREET ADDRESS	25 Saadleback	Rd.
CITY-ST-ZIP	JUPITER ISLAND FL 33469		1.4 CITY-ST-ZIP	25 Saddleback Teguesta Fi 334	69
TITLE		☐ DETE <u>Í</u> E	2.1 TITLE	,	☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		Officer D Addition
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		-
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE		□ pere≀e	4.1 TITLE	·	
NAME			4.2 NAME	-	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
TITLE		OCCLIE	52 NAME	•	
NAME			5.3 STREET ADORESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		)
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		Change Addition
TITLE			6.2 NAME		
NAME			6.3 STREET ADDRESS		
STREET ADDRESS			6.3 STREET ADDRESS		

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.

R. Mason Simpson, Pres.