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

PROFIT CORPORATION ANNUAL RÉPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000083960

KELLY REAL ESTATE SERVICES, INC.

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90116 019 ***150.00



Principal Place	of Business	Mailing Address				118611881 tid tätdt (Bitt 68ti) ditt aditt Zoidt ididd (1112 12112 21111 2211. 1221				
19909 U.S. HIGH	HWAY 41 NORTH	19909 U.S. HIGHWAY 41 NORTH				ļ				
LUTZ FL 33549		LUTZ FL 33549				DO NOT WRITE IN THIS SPACE				
**************************************			-			3. Date Incorpora		· ·	- AGE	
	· .					09/29/1998				i
A District D		n- Mailing Address			,	4. EEL Number			ΙΔn	plied For
 -	ace of Business	2a. Mailing Address				159-25	3665	0	<u>-</u>	t Applicable
21		Suite, Apt. #, etc.				01-00.	, , , , , , , , , , , , , , , , , , , 		\$8.75	
Suite, Apt.	#, etc.	⊢				5. Certifcate of St	atus Desired		Fee Re	
22		City & State				5 Floriber Co-05	-l Cii		\$5.00	
City & State	9	28				6. Election Camp Trust Fund Cor	•		Added 1	7
Zip	Country	Zip Country				8. This corporation		ent voor intar		
	25	29 30]	,		Personal Prope			Yes	□No
24	9. Name and Address of Current				_	10. Name and Ad				
	g, Namo and Address of Carton	regiotorea Agent	8	B1 Na	ame		•			
KELLY, RÓBERT A JR.										
	8 PRESERVATION DRIVE	82 Street A			reet Addres	ss (P.O. Box Numbe	r is Not Accepta	ible)		,
	D O' LAKES FL 34639		ļ,	83						
	5 6 6 11 12 1 12 1 13 13 13 13 13 13 13 13 13 13 13 13 1		- [•		_				
		,	1	84 Ci	ity			FL	85 Zip	Code
44 Pursuant	to the provisions of Sections 607 0502	and 607.1508. Florida Statutes.	the abo	ove-nar	med corpo	ration submits this st	atement for the		hanging its	registered
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	Florida. Such change was autho	rized l	by the	corporation	i's board of directors	Thereby accep	ot the appoint	ment as re	gistered
agent. i ai	m tamiliar with, and accept the obligan	onsolves client our dood, Florida	Sialu				,			
SIGNATURE	Signature, typed or printed name of registered agent	and title Vapplicable. (NOTE: Reg	istered A	gent sign:	ature required	when reinstating)		DATE		
12.	OFFICERS AND		13.			ADDITIONS/CH	ANGES TO OF	FICERS AND	DIRECTO	
TITLE	D .	☐ DELETE	1.1 TITU	E					Change	☐ Addition
NAME	KELLY, ROBERT A JR.		1.2 NAM	Æ		-				
STREET ADDRESS	21318 PRESERVATION DRIVE		1.3 STR	EET ADDF	RESS					- 1
CITY-ST-ZIP	LAND O' LAKES FL 34639		1.4 CITY	/-ST-ZIP	.					
TITLE		☐ DELETE	2.1 TITL						☐ Change	☐ Addition
NAME			2.2 NAM	Æ	- 1					
STREET ADDRESS	[`		2.3 STR	EET ADD	RESS					}
				Y-ŞT-ZIP						
CITY-ST-ZIP		☐ DELETE	3.1 TITL		_				Change	Addition
NAME		— • • •	3.2 NAM						-	
				EET ADDI	DEGS	•				
STREET ADDRESS										1
CITY-ST-ZIP TITLE	<u> </u>	☐ DELETE	4.1 TITL	Y-ST-ZIP F					Change	Addition
\ \ \			4.1 INC							
NAME					occe					
STREET ADDRESS				EET ADD						
CITY-ST-ZIP		□ nci ete		Y-ST-ZIP	<u>'</u>				☐ Change	Addition
TITLE		☐ DELETE	5.1 TITL 5.2 NAM							
NAME					ocee					
STREET ADDRESS	•			EET ADDI						
CITY-ST-ZIP				r-ST-ZIP					□ Chonac	Addition
TITLE		☐ DELETE	6.1 TITL						Change	
NAME			6.2 NAM							
STREET ADDRESS	-		6.3 STR	EET ADD	RESS					
CITY-ST-ZIP		•	6.4 CITY	Y-ST-ZIP	· _l					

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.