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 # S03842

FILED Jan 21, 1999 8:00am Secretary of State 01-21-1999 90077 001 ***150.00

| 1. Corporatio | BY REALTY CO. | - | | |) 190/1818 (1) 90/08 (1)(8) (8)(1) (1)(1) | iğir diğir Bibir Dibir i | 5/3/) 6 /6/1 / 100/ |
|--|---|---|--|---|--|---------------------------|--------------------------------------|
| | | | | | | | |
| Principal Plac | | Mailing Address | | | | | |
| 4251 HIGHWAY 441, SOUTH 4251 HIGHWAY 441, SOUTH OKEECHOBEE FL 34974 OKEECHOBEE FL 34974 | | | | | | | |
| | | | | | DO NOT WRITE IN T | HIS SPACE | |
| i | • | | | | 3. Date Incorporated or Qualifed 10/04/1990 | | ı |
| Principal Place of Business 2a. Mailing Address | | | | 4. FEI Number | Ap | plied For | |
| 21 26 | | | | 65-0219933 | No | t Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 / Fee Re | |
| City & Stat | te | City & State | | | 6. Election Campaign Financing | \$5.00 | |
| 23 | | 28 | | | Trust Fund Contribution | Added t | |
| Zip ─ | Country | Zíp r | Country | у | 8. This corporation owes the current year | | |
| 24 | 25 25 C | | 30 | | Personal Property Tax. | Yes | □No □ |
| | 9. Name and Address of Currer | ni Registered Agent | 81 | 1 Name | 10. Name and Address of New Register | eu Agent | |
| | DLSBY, DAVID E. | | 82 | | ess (P.O. Box Number is Not Acceptable) | | |
| 4251 HIGHWAY 441' SOUTH | | 02 | Street Addre | | | | |
| OKE | ECHOBEE FL 34974 | | 83 | 3 | | | 1 60 M |
| | | | 84 | City | The state of the s | 7.07 | Code |
| nace a stress of the se | | ** ** | - 1 | 1 | F | - L | } |
| | | | is, life abov | ve-named corpo | oration submits this statement for the purpose | | registerea |
| office or r agent. I a SIGNATURE | registered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or printed name of registered ageing | | | ve-named corporation the corporation s. ant signature required | oration submits this statement for the purpose in's board of directors. I hereby accept the ap | | gistered gistered |
| | Signature, typed or printed name of registered agei | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered age OFFICERS AN | int and title if applicable. (NOTE: | Registered Age | | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | | |
| SIGNATURE | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. | ant and title if applicable. (NOTE: | Registered Age | ent signature required | when reinstating) DATE | AND DIRECTO | DRS IN 12 |
| SIGNATURE 12. TITLE | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. | ant and title if applicable. (NOTE: | Registered Age 13, 1.1 TITLE 1.2 NAME | ent signature required | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | DRS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL | int and title if applicable. (NOTE: ND DIRECTORS | Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE | ent signature réquired | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | DRS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD | ant and title if applicable. (NOTE: | 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE | ent signature required ET ADDRESS | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | DRS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. | int and title if applicable. (NOTE: ND DIRECTORS | 13, 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME | ent signature required ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | DRS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. | int and title if applicable. (NOTE: ND DIRECTORS | 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE | ent signature required ET ADDRESS ST-ZIP ET ADDRESS | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | DRS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL | Inf and tyle if applicable. (NOTE: ND DIRECTORS DELETE DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- | ent signature required ET ADDRESS ST-ZIP ET ADDRESS | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO Change | DRS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE STORY STORY | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. | int and title if applicable. (NOTE: ND DIRECTORS | 13, 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | DRS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. | Inf and tyle if applicable. (NOTE: ND DIRECTORS DELETE DELETE | Registered Age 13, 1.1 TITLE 12 NAME 13 STREE 14 CITY-5 21 TITLE 22 NAME 23 STREE 2.4 CITY- 31 TITLE 32 NAME | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO Change | DRS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. | Inf and tyle if applicable. (NOTE: ND DIRECTORS DELETE DELETE | 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY- 22 NAME 22 STREE 2 4 CITY- 31 TITLE 32 NAME 33 STREE | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO Change | DRS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. | Inf and tyle if applicable. (NOTE: ND DIRECTORS DELETE DELETE | 13, 1.1 TITLE 12 NAME 1.3 STREE 14 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO Change Change | DRS IN 12 Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL OKEECHOBEE FL | Init and little if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE DELETE | Registered Age 13, 1.1 TITLE 12 NAME 1.3 STREE 14 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-5 | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO Change Change | DRS IN 12 Addition Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881, SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881, SE 24TH BLVD. | Inf and little if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE | 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY- 22 NAME 23 STREE 2 4 CITY- 31 TITLE 32 NAME 33 STREE 34. CITY- 4.1 TITLE 4.2 NAME | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO Change Change | DRS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881, SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881, SE 24TH BLVD. | Inf and little if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE | Registered Age 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-3 21 TITLE 22 NAME 23 STREE 2.4 CITY- 31 TITLE 32 NAME 33 STREE 34. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-STREE 4.4 CITY-STREE 4.4 CITY-STREE 4.5 CITY-STREE | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | Change | DRS IN 12 Addition Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881, SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881, SE 24TH BLVD. | Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE | 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-5 21 TITLE 22 NAME 23 STREE 2.4 CITY- 31 TITLE 32 NAME 33 STREE 34. CITY- 41 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO Change Change | DRS IN 12 Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME | Signature, typed or printed name of registered age OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881, SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881, SE 24TH BLVD. | Inf and little if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE | 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2.4 CITY- 31 TITLE 32 NAME 33 STREE 34. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 52 NAME | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | Change | DRS IN 12 Addition Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | OFFICERS AN OFFICERS AN OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL | Inf and little if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE | 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2.4 CITY- 31 TITLE 32 NAME 33 STREE 34. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 52 NAME 53 STREE | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | Change | DRS IN 12 Addition Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL | Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE DELETE | 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-5 21 TITLE 22 NAME 23 STREE 2.4 CITY- 31 TITLE 32 NAME 33 STREE 34. CITY-5 11 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-5 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-5 5.3 STREE 5.4 CITY-5 | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | Change Change Change | DRS IN 12 Addition Addition Addition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | OFFICERS AN OFFICERS AN OFFICERS AN PD GOOLSBY, DAVID E. 1881 SE 24TH BLVD. OKEECHOBEE FL VD GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL ST. GOOLSBY, PATRICIA L. 1881 SE 24TH BLVD. OKEECHOBEE FL | Inf and little if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE | 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2.4 CITY- 31 TITLE 32 NAME 33 STREE 34. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 52 NAME 53 STREE | ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS | Change | DRS IN 12 Addition Addition Addition |

6.4 CITY-ST-ZIP 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, arpn an attachment with an address, with all other like empowered.

SIGNATURE

CR2E034 (11/98)