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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

S05023

(4)

LEVITT REALTY SERVICES, INC. #305

Principal Place of Business

Mailing Address

## **FILED** Mar 20 1998 8:00am Secretary of State



8432 HUNTINGTON LAKES CIR. #104 NAPLES FL 33999		6432 HUNTINGTON LAKES CIR. #104 NAPLES FL 33999		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  10/10/1990  4. FEI Number  Applied For				
<u> </u>	lace of Business	<del></del>						<del></del>
Suite, Apt.	# ptc	Suite, Apt. #, etc.	<del>,</del>		59-3032011			ot Applicable Additional
22	w, 610.	27			5, Certificate of Status Desired	□ ³		equired
City & Stat	e	City & State			Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Zip 29	Count	ſ <b>y</b>	This corporation owes or has pail     Personal Property Tax due June		_	langible ] No
<u> </u>	9. Name and Address of Current		130		10. Name and Address of New Reg			
110 TAI	E PRENTICE-HALL CORPORATION NORTH MAGNOLIA LLAHASSEE FL 32301  to the provisions of Sections 607.0507 registered agent, or both, in the State in familiar with, and accept the obliga	and 607.1508, Florida Stat of Florida, Such change was	s authorized t	2 Street Add 1201 3 4 City Talloh ve-named corporate to the corporate	dress (P.O. Box Number is Not Acceptable Section Submits this statement for the plation's board of directors. I hereby acceptable statement for the plation's board of directors. I hereby acceptation submits this statement for the plation's board of directors.	FL 8	anging it	Code  Code  Social Services of the code of
SIGNATURE					uired when reinstaling)	DATE		
12.	Signature, typed or printed name of registered agen OFFICERS AND		13.	Jeni signature requ	ADDITIONS/CHANGES TO OFFIC		RECTOR	RS IN 12
TITLE	D	DELETE	1.1 TITLE		ADDITIONO/OFFICIALS TO CITTE		Change	Addition
NAME	WIENER, ELLIOTT M		1.2 NAME				•	
STREET ADDRESS	7777 GLADES RD., STE 410			ET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-	_				
TITLE	TD	DELETE	2.1 TITLE		The second		Change	Addition
NAME	HOYOS, JEFFREY		2.2 NAME	:	The same and the s	~		
STREET ADDRESS	7777 GLADES ROAD, SUITE 4	10	2.3 STREE	ET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33434		2. 4 CITY	- ST- ZIP				
TITLE	DP	☐ DELETE	3.1 TITLE	- +			Change	Addition
NAME	FAGAN, PETER F		3.2 NAME					
STREET ADDRESS	7777 GLADES RD., STE 410			ET ADDRESS				
City-ST-ZIP	BOCA RATON FL		3.4. CITY					
TITLE	SD	DELETE	4.1 TITLE				Change	Addition
NAME	WEST, ALFRED G		4. 2 NAM	E				
STREET ADDRESS	7777 GLADES RD, STE 410			ET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL		4.4 CITY-					
TITLE	BOOKINIONIE	☐ DELETE	5.1 TITLE			. [1]	Change	Addition
NAME			5.2 NAME					
STREET ADDRESS				ET ADDRESS				
į			5.5 STREE					
CITY-ST-ZIP TITLE		DELETE	61 TITLE			П	Change	Addition
		otter	6.2 NAME					
NAME etheet annocce				T ADDRESS				
STREET ADDRESS			6.4 CITY-					
CITY+ST-ZIP			■ 0.4 LHT-	D1 * 41F				

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 any state of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplemental any state of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplemental any state of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplemental any state of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplemental any state of the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplemental any suppleme