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Apr 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S09670 (8)

1. Corporation Name
CORSON PROPERTY MANAGEMENT, INC.

Principal Place of Business
2536 COUNTRYSIDE BLVD.
CLEARWATER FL 34623

Mailing Address
2536 COUNTRYSIDE BLVD.
CLEARWATER FL 34623



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 4821 US Hwy 19	26 4821 US Hwy 19		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22 Suite #4	27 Suite #4		
City & State	City & State		
23 New Port Richey, FL	28 New Port Richey, FL		
Zip	Zip		
24 34652	29 34652		
Country	Country		
25 USA	30 USA		

3. Date Incorporated or Qualified 10/29/1990	
4. FEI Number 59-3036017	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
DOUBNA, HEATHER L 2536 COUNTRYSIDE BLVD SIXTH FLOOR CLEARWATER FL 34623		81 Name George Vasiliades 82 Street Address (P.O. Box Number is Not Acceptable) 4821 U.S. Highway 19 Suite #4 83 84 City N.P.R FL 85 Zip Code 34652	

11. Pursuant to the provisions of Sections 607.0502 and 607.508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *George Vasiliades Pres.* 3/25/98
Signature, typed or printed name of registered agent and filed if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSDT	1.1 TITLE	PSDT
NAME	BOESCH, GARY R.	1.2 NAME	George Vasiliades
STREET ADDRESS	2536 COUNTRYSIDE BLVD.	1.3 STREET ADDRESS	4821 U.S. Highway 19 Suite #4
CITY-ST-ZIP	CLEARWATER FL	1.4 CITY-ST-ZIP	N.P.R., FL 34652
TITLE	VP	2.1 TITLE	VP
NAME	BOESCH, KENNETH W. JR	2.2 NAME	Chuck KALOGIANIS
STREET ADDRESS	2536 COUNTRYSIDE BLVD	2.3 STREET ADDRESS	4821 U.S. Highway 19 Suite #4
CITY-ST-ZIP	CLEARWATER FL	2.4 CITY-ST-ZIP	N.P.R., FL 34652
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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, or on an attachment with an address.

SIGNATURE: *George Vasiliades* PRESIDENT
GEORGE VASILIADES

CR2E034 (10/97)