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

PROFIT CORPORATION ANNUAL REPORT

1998

FLÖRIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # \$14348

(4)

TRANS CONTINENTAL PROPERTY SERVICES INC.

| Principal Place | e of Business |
|----------------------------|---------------|
| 2135 GUNN R KISSIMMEE F | |

Mailing Address

2135 GUNN ROAD KISSIMMEE FL 34746

FILED

Jun 04 1998 8:00am

Secretary of State

| US US | | | | DO NOT WRITE IN THIS SPACE | | | | | | |
|--------------------------------------|------------------------|--------------------------|-------------|---|---------------|--------------|--------|---|-------------|---------------------------|
| | | | | | | | 3. | Date incorporated or Qualified 11/26/1990 | | |
| 2. | Principal Place of B | usiness | 2a. | Mailing Address | | <u></u> | 4. | FEI Number | | Applied L |
| 21 | | | 26 | | | | | 59-3045913 | <u> </u> | Not Applic |
| 22 | Suite, Apt. #, etc. | | 27 | Suite, Apt. #, etc. | | | 5. | Certificate of Status Desired | | 75 Addition a Required |
| 23 | City & State | | 28 | City & State | | | 6. | Election Campaign Figancing Trust Fund Contribution | | ,00 May Br |
| 24 | Zφ | Country 25 | 29 | Zip | Country 30 | | 8. | This corporation owes or has paid the Personal Property Tax due June 30. | current yea | r Intangible |
| | 9, Na | me and Address of Cu | rrent Regis | tered Agent | | | 10. | Name and Address of New Register | red Agent | |
| | DELANEY, | JAMES T. | _ | | 81 | Name | | | | |
| 2135 GUNN ROAD KISSIMMEE FL 34746 | | | 82 | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | 83 | | | | | |
| | | | | | 84 | City | | | FL 85 | Zip Code |
| 1 | 1. Pursuant to the pro | ovisions of Sections 607 | .0502 and 6 | 07.1508, Florida Statute | s, the abov | a-named corp | oratio | submits this statement for the purpo | | na its reaist |

office of 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, and accept the obligations of Section 607.0505. Florida Statutes

| SIGNATUR E | Signature, typed or printed name of registered agent and | 1007/ | Registered Agent signature regu | | DATI | |
|-------------------|--|----------|---------------------------------|-------------------------------|-------------|--------|
| 12. | OFFICERS AND DIF | | 13. | ADDITIONS/CHANGES TO OFFI | | INL CO |
| TITLE | P | DELETE | 1.5 THILE | ADDITIONS/CHAINGES TO OFFI | | Add |
| NAME | DELANEY, JAMES T. | CT OFFER | 1.2 NAME | | - Guillinge | |
| l | 2135 GUNN ROAD | | | | | |
| STREET ADDRESS | KISSIMMEE FL 34746 | | 1.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | VST VST | Prietr | 1.4 CITY-ST-ZIP | | | 77. |
| TITLE | . = + | DELETE | 2 1 TITLE | | ☐ Change | Adn |
| NAME | DELANEY, LINDA KAREN | | 22 NAME | | | |
| STREET ADDRESS | 2135 GUNN ROAD | | 2.3 STREET ADDRESS | | | |
| CITY - ST - ZIP | KISSIMMEE FL 34746 | | 2. 4 CITY - \$1 - ZIP | | | |
| TITLE | | DELETE | 3.1 TITLE | | Change | Ac |
| NAME | | | 3.2 NAME | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 3.4 CITY-ST-2IP | | | |
| TITLE | | DELETE | 4.1 TITLE | | Change | Adr |
| NAME | | | 4.2 NAME | | | |
| STREET ADDRESS | | | 43 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY - ST - ZIP | | | |
| TITLE | | DELETE | 5.1 TITLE | | ☐ Change | Ad |
| NAME | | | 5.2 NAME | - 5000 <u>0</u> 2553 | 200 | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | 500002553; -06/09/9801077- | NS3 | |
| CITY - ST - ZIP | | | 54 CHTY-ST-ZIP | *** 1 50.00 | | |
| TITLE | | DELETE | 6.1 TITLE | | hange | Adi |
| NAME | | | 6.2 NAME | | M/ | Ί. |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | }" | 1.14 |

14. Thereby 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 of supplemental annual report is frue 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 a Block 12 or Block 13 if changed or on a relationment with a valderers.