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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

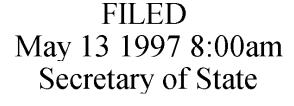
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S14859

(0)

FLANAGAN PROPERTY COMPANY OF FLORIDA, INC.





Principal Place of Business 990 N. ORANGE AVENUE SUITE 1975 ORLANDO FL 32801			Mailing Address 390 N. ORANGE AVENUE SUITE 1875 ORLANDO FL 32801-1681				Date Incorporated or Qualified			
							11/28/1990	04/	29/1996	
	ace of Business	2a.	Mailing Address				4. FEI Number		Ar	oplied For
21		26					59-3047347			ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State			City & State			6. Election Campaign Financing \$5.00 May Be				
23			28			Trust Fund Contribution Added to Fees				
Zip	Country		Zip	Cour	itry		8. This corporation has liability for	intangible	tax under s	. 199.032,
24 25			29 30				Florida Statutes Yes No			
	9. Name and Address of Currer	nt Regis	stered Agent		~-		10. Name and Address of New Re	gistered	Agent	
GOD	BOLD, GENE H.				81	Name				
222 W. COMSTACK AVENUE SUITE 101					82	Street Add	dress (P.O. Box Number is Not Acceptat	ole)		
WINT	TER PARK FL 32789				83					
					84	City			85 Zip	Code
							rporation submits this statement for the p	FL	<u> </u>	
12.	Signature, typed or printed name of mystered ag OFFICERS AN		CTORS	13.		nt signature req	ured when re-rest-ding) ADDITIONS/CHANGES TO OFFICE	DATE DERS AND		RS IN 12
TITLE	D		☐ DELETE	1.1 TIT					Change	Addition
NAME	FLANAGAN, STEPHEN H.			1.2 NA						
STREET ADDRESS	390 N. ORANGE AVENUE, SU	IIE 18	75			ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32801-1641		DELETE	1.4 CIT		1- ZIP			Change	Addition
TITLE	D		Thouse	2.1 7/1					Unange	€ Nacino
NAME	Flanagan, Judith ann 390 n. Orange Avenue, Su	ITE 40'	76	2 2 NA		ADORESS				
STREET ADDRESS	ORLANDO FL 32801-1641	115 10	79	2.3 311						
CITY-ST-ZIP TITLE	UNDANDO FL 32001-1041		DELETE	31 TH		51-711			Change	Addition
NAME				32 NA						-
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				3.4. CI						
TITLE			☐ DELETE	41 1 3					☐ Change	Addition
NAME				4 2 N	ME	İ				
STREET ADDRESS				4351	HEF1	ADDRESS				
CITY-ST-ZIP				4.4.01	Y- S	T-ZIP				
TITLE			DILETE	5.1 111	Œ				Change	Addition
NAME				5.2 NA	Μŧ					
STREET ADDRESS				5.3 \$1	REET	ADDRESS				
CITY-ST-ZIP				5.4 CII	Y-S	1 - 21!				
TITLE	•		☐ DELETE	6.1 TiT	ĻĒ				Change	Addition
NAME				G.2 NA	ME					
STREET ADDRESS				6.3 \$1	REET	ADDRESS				
CITY-ST-ZIP				6.4 CI	Y - S	51 - 71F	0.0000000000000000000000000000000000000			

14. I do 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.