

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

FILED

Mar 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S26035 (3)  
1. Corporation Name  
DEVELOPERS OF SOUTHWEST FLORIDA REALTY, INC.



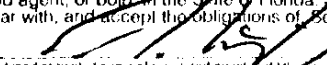
Principal Place of Business 1250 MARION AVE SUITE 301 PUNTA GORDA FL 33950 US	Mailing Address 1250 MARION AVE SUITE 301 PUNTA GORDA FL 33950 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified 01/18/1991	
24		29		4. FEI Number 65-0240511	
25		30		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 type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CRIST, DOUGLAD E. 1250 W MARION AVE SUITE 301 PUNTA GORDA FL 33950				10. Name and Address of New Registered Agent 81 Name ED NOTITZKY 82 Street Address (P.O. Box Number is Not Acceptable) 243 TAYLOR ST 83 84 City PUNTA GORDA FL 85 Zip Code 33950			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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  DATE 2/10/98  
(Not: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VP	<input type="checkbox"/> DELETE		1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LEONARD, FRED			1.2 NAME	1250 W. MARION AVE #124		
STREET ADDRESS	801 SHREVE ST			1.3 STREET ADDRESS	PUNTA GORDA, FL 33950		
CITY - ST - ZIP	PUNTA GORDA FL			1.4 CITY - ST - ZIP			
TITLE	PS	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CRIST, DOUGLAS E			2.2 NAME			
STREET ADDRESS	2305 BOLLMAN DRIVE			2.3 STREET ADDRESS			
CITY - ST - ZIP	LANSING MI			2.4 CITY - ST - ZIP			
TITLE	VPT	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	JOHNS, LEWIS D			3.2 NAME			
STREET ADDRESS	316 E MICHIGAN AVE			3.3 STREET ADDRESS			
CITY - ST - ZIP	LANSING MI			3.4 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY - ST - ZIP				4.4 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY - ST - ZIP				5.4 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 recoverer 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 additional page with an address.

SIGNATURE:  DOUGLAS E. CRIST 2/13/98 941-639-4220

CR2E034 (10/97)