Mailing Address

SUITE 2100

201 N. FRANKLIN STREET

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$31546

1. Corporation Name

Principal Place of Business

201 N. FRANKLIN STREET

SUITE 2100

PARKER-LINCOLN COMMERCIAL REALTY, INC.

TAMPA FL 3360	2	TAMPA FL 33602					DO NOT WRITE IN THIS SPACE						
	-						Date In	corporated or Qualifed					
							02/13	/1991					
2. Principal Pt	ace of Business	2a. Mailing Address				4.	FEI Nu:	nber			App	lied For	
नी		26					59-30	50029			Not	4pplicable	
Suite, Apt. #, etc. Suite, Apt.			#, etc.							\$8.	75 A	ditional	
27						5.	Certifica	te of Status Desired		F	ee Rec	uired	
City & State	2	City & State					Election	Campaign Financing		\$5	.00	ay Be	
:3	28					•		and Contribution			ided to	-	
Zip	Coun ry	Zíp Coun			-	8. This corporation owes the current year I stangible							
4	25	29 30				0.		il Property Tax.		∐ Ye:		[]No	
	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent							
	g. realite and realities			81	Name								
MITCHELL, STEPHEN J.													
	N. FRANKLIN STREET, SUITE 21	00			Street /	Ad tress (F	P.O. Box	Number is Not Accept	(able)				
	E 2100			83									
	PA FL 33602			"									
1 A WII	A 1 L 30002			84	City				F⊩	85	Zip C	ode	
				_ _	L						/4		
office are	to the provisions of Sections 607.0503 egistered agent, or both, in the State of m familiar with, and accept the obligat	o Florida. Such change w	vas authoriz	ec by	tne corpo	co poration oration's bo	n submit oard of d	s this statement for the irectors. I hereby acce	purpose of pt the app of	changi ntment	ng its i as reg	egistered istered	
SIGNATURE													
	Signature, typed or printed name of registered agen		(NOTE: Registe		nt signature re				DATE				
12.		C DIRECTORS					ADDITIC	NS/CHANGES TO O	FFICERS / I	ID DIR		Addition	
TITLE	VPT	☐ DELET	TE 11	TITLE							ange	L] Addition	
NAME	Parker, Jack		1.2	NAME									
STREET ADDRESS	118 W. 57TH STREET		1.3	1.3 STREET ADDRESS									
CITY-ST-ZIP	NEW YORK NY		1.4	CITY-S	T-ZIP								
TITLE			TE 2.1	2.1 TITLÉ						☐ Ch	ange	☐ Addition	
NAME	GLICK, ADAM		2.2	22 NAME									
STREET ADORESS	,		2.3	2.3 STREET ADDRESS								· ·	
CITY-ST-ZIP	NEW YORK NY		2. 4	2. 4 CITY-ST-ZIP									
TITLE	VAS			3.1 TITLE						☐ Ch	ange	Addition	
NAME	MITCHELL, STEPHEN J.		3.2	NAME									
STREET ADDRESS					T ADDRESS								
	<u> </u>			i. CITY-S									
CITY-ST-ZIP	TAMPA FL V	☐ DELE1		TITLE	л-дг					☐ Cr	ange	Addition	
TITLE				2 NAME							•		
NAME	BRADY, DAVID	DD.											
STREET ADDRESS	5500-103 ATLANTIC SPRINGS	KD			TADDRESS								
CITY-ST-ZIP	RALEIGH NC			CITY-S	T-ZIP					Ch	anne	Addition	
TITLE	V	☐ DELET		TITLE							ungo		
NAME	urben, david a.			NAME									
STREET ADORESS	5500-103 ATLANTIC SPRINGS	RD.			TADDRESS								
CITY-ST-ZIP	RALEIGH NC			CITY-S	T-ZIP								
TITLE	AVP	☐ DELET		TITLE						☐ Ch	ange	Addition	
NAME	GORDON, JULIUS		62	NAME.									
STREET ADDRESS	118 W. 57TH STREET		63	STREE	TADDRESS								

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

NEW YORK NY

NTED NAME OF SIGNING OFFICE! OR DIRECTOR

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 attach nent with an address, with a lother like empowered.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90203 032 ***150.00