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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$35786

1. Corporation Name

GALBRAI	TH PROPERTIES, INC.							
Principal Place	of Business	Mailing Address				-	(B)1 MIMIT B)811 MIMI)(11:0() 01011 1001
SUITE 1300 SUITE 1300 360 CENTRAL AVENUE 360 CENTRAL AVENUE ST. PETERSBURG FL 33701 ST. PETERSBURG FL 33701			0 1			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed 03/04/1991		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	$\overline{}$	Applied For
21		26			•	59-3068366		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired		Additional Required	
City & State	3		City & State			6. Election Campaign Financing	\$5.0	0 May Be
23	•	28				Trust Fund Contribution	•	d to Fees
Zip			Countr	Country		8. This corporation owes the current year	r Intangible	-
24	25	29	30			Personal Property Tax.	Yes	ŪNo
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registe	red/Agent	
	DDAPTI - 101 H1 11/		8	1 1	Name			
Galbraith, John W. Suite 1300			82	2 5	Street Addre	dress (P.O. Box Number is Not Acceptable)		
360 CENTRAL AVE STE 1300			83	3		- Han		
ST. F	PETERSBURG FL 33701			_			1001 70	- Code
			84	84 City			FL 85 Zir	p Code
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was a tions of, Section 607.0505, Flo	authorized by orida Statute	y ine	e corporation	ration submits this statement for the purpos 's board of directors. I hereby accept the a	рронипен аз	its registered registered
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg 12. OFFICERS AND DIRECTORS			E: Registered Age	ent sig	gnature required	ADDITIONS/CHANGES TO OFFICER		TORS IN 12
TITLE			1,1 TITLE	_		7,0011,0110,07%,11.020	☐ Chang	
NAME			1,2 NAME					
STREET ADDRESS	360 CENTRAL AVE STE 1300		1.3 STRE	1.3 STREET ADDRESS				
CITY-ST-ZIP			1.4 CITY-	1.4 CITY-ST-ZIP				
TITLE				2.1 TITLE			☐ Chang	e Addition
NAME			2.2 NAME	2.2 NAME				
STREET ADDRESS	360 CENTRAL AVE. STE 1300		2.3 STREET ADDRESS		DRESS	·		
CITY-ST-ZIP	ST. PETERSBURG FL		2. 4 CITY-ST-ZIP		iP			
TITLE		☐ DELETE	3.1 TITLE	:			Change	e 🗌 Addition
NAME			3.2 NAME	Ε				
STREET ADDRESS	3.3		3.3 STRE	3.3 STREET ADDRESS				
CITY-ST-ZIP			34. CITY-	34. CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE				☐ Chang	je 🗌 Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE		ORESS			
CITY-ST-ZIP			4.4 CITY-	-\$T- <i>Z</i> I	IP			
TITLE				5.1 TITLE		•	☐ Chang	je 🗌 Addition
NAME			5.2 NAME					Ì
STREET ADDRESS			5.3 STRE					}
CITY-ST-ZIP				5.4 CITY-ST-ZIP			Chart	je 🗆 Addition
TITLE		☐ DELETE	6.1 TITLE 6.2 NAME				Chang	le Magniou
NAME			6.2 NAME		DRESS			ļ

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 changes, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

John Wm. Galbraith

2/18/99

727-823-2578