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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S40891

(1)

DONNA HANAUER REALTY AND DEVELOPMENT CORP.

**FILED** Apr 24 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					. (00)(016 (1) 01011 08:01 10110 10(01:110) 0	an attil alam alam alam aham aham
2165 SW MAPP RD P.O BOX 227						
PALM CITY FL 34990 US		PALM CITY FL 34991 US	PALM CITY FL 34991 US		DO NOT WRITE IN	THIS SPACE
		•••			3. Date Incorporated or Qualified	
					03/25/1991	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
	SEInlet HArby K			· · · · · · · · · · · · · · · · · · ·	65-0254520	Not Applicable
Suite, Apt.	#, <b>9</b> 1C.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State	<u> </u>	City & State			A Flastin Oncoming Figure 1	Fee Required
	Stuart, #L 28				Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zφ	Count	ry	8. This corporation owes or has paid to	
24 349	96 25 USA	29	30		Personal Property Tax due June 30	
	9. Name and Address of Curre	ent Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Regis	tered Agent
	NAUER, DONNA		8	1 Name		
2165 SW MAPP RD PALM CITY FL 34990			Te	2 Street	Address (P.O. Box Number is Not Acceptable)	
PAI		8	3	<del></del>		
			ľ	ا"		
			8	4 City		FL 85 Zip Code
11, Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-n					corporation submits this statement for the purp	
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						
	Signature, typed or printed name of registered a	~ <del>`</del>		gent signature	· · · · · · · · · · · · · · · · · · ·	DATE
12.	PST OFFICERS A	ND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12  Change
NAME	HANAUER, DONNA		1.2 NAM			C. cuande C. vocilion
STREET ADDRESS	2165 SW MAPP RD			ET ADDRESS		
CITY-ST-ZIP	PALM CITY FL		1.4 CITY			
TITLE	D	DELETE	2.1 TITLE		***	Change Addition
NAME	HANAUER, DONNA		2.2 NAM			_ , _
STREET ADDRESS	2165 SW MAPP RD		2.3 STRE	ET ADDRESS		
CITY-ST-ZIP	PALM CITY FL		2.4 City	-\$1-ZIP		
TITLE	VO	☐ DELETE	3 1 TITLE			Change Addition
NAME	HANAUER, RONALD J.		3 2 NAM	i .		
STREET ADDRESS	2165 SW MAPP RD		3.3 STRE	et address		
CITY-ST-ZIP			3.4. CITY		· •	
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM			
STREET ADDRESS				et address		
CITY-ST-ZIP		DELETE	4.4 CITY			Change Addition
TITLE		ר"ו מנדנונ	5.1 TITLE			☐ crøuffe ☐ vadir(qu)
STREET ADDRESS			5.2 NAM			
CITY-ST-ZIP			5.3 STRE 5.4 CITY	ET ADDRESS		
TITLE		DELETÉ	6.1 TITLE			Change Addition
NAME			6.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			6.4 CITY			
44 Lharabi a	- 14 . th - 1 th - 1 - 1 - 1 - 1 - 1	the state of the s			11: 0 -11: 440 07/0VD FI-11: 01:11: 15:-1	1 19 1 1 1 1 1

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 informatio 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 arm 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 of changed, or on an attachment with an address.