## **FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Apr 13 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (6)MGI REALTY, INC. Principal Place of Business Mailing Address 2487 ALOMA AVE 2487 ALOMA AVE SUITE 101 SUITE 101 DO NOT WRITE IN THIS SPACE WINTER PARK FL 32792 WINTER PARK FL 32792 3. Date Incorporated or Qualified 05/24/1991 2. Principal Place of Business 2a. Mailing Address Applied For 2479 ALOMA AVENUE 2479 ALOMA AVENUE 59-3070567 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be WINTER PARK 28 WINTER Added to Fees 23 Trust Fund Contribution Country Country This corporation owes or has paid the current year Intangible 115 32792 US Yes ΠNο Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name PETTERSON, RICHARD A. 1167 LAKEVIEW DR Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32789 Zip Code 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 Shite 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 objection 607.0505, Florida Statutes. SIGNATURE SIGNATURE Julian Signature, typed or printed name of registerist agent and title if applicable (NOTE Registered Agent signature 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change 1.1 TITLE TITLE PETTERSON, RICHARD A 12 NAME NAME 1167 LAKEVIEW DR STREET ADDRESS 1.3 STREET AOORESS WINTER PARK FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Addition 2.1 TITLE TITLE DS PETTERSON, KATHRYN K. NAME 22 NAME 1167 LAKEVIEW DR 2.3 STREET ADDRESS STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP Change DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change \_\_\_ Addition DELETE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. Thereby 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 dispowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

DELETE

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

■ Addition

Change