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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S72818

(5)

PETERS REALTY, INC.

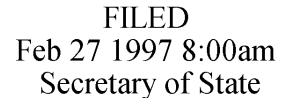
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Princinal	Place	of	Rus	ezonis

1911 S FEDERAL HWY

Mailing Address

1911 S FEDERAL HWY DELRAY BEACH FL 33483-331





DELRAY BEACH FL 33483		DELRAY BEACH FL 33483-3312								
					3. Date Incorporated or Qualified 08/13/1991		te of La 26/19	ast Report <b>96</b>		
	ace of Business	2a. Mailing Address			4. FEI Number			Applied For		
	LINTON BLVD.	26 100 E.LI		BLVD.	65-0280910			Not Applicable		
Suite, Apt.	*, etc. SUITE 212 B	Suite Apt. #, etc. 27 SUITE 212 B			5. Certificate of Status Desired			75 Additional se Required		
	AY BEACH, FL.	City & State DELRAY BEACH, FL.			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees			
Zip 3348	3 Country PALM	29 33483	30 Cour	ST PALM	8. This corporation has liability for in Florida Statutes	ntangible ] Yes [		der s. 199.032,		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	gistered A	Agent			
	ers, willi g			81 Name						
	BLUEBIRD LANE		<u>†</u>	82 Street Addre	ess (P.O. Box Number is Not Acceptab	le)				
DELI	RAY BCH. FL 33445		ļ	ВЗ				· · · · · · · · · · · · · · · · · · ·		
				63						
			1	64 City		FL	85	Zip Code		
11 Purcuant I	to the provisions of Sactions 607.0502	and 607 1508 Florida Statut	tes the et	ove-named corp	oration submits this statement for the p-		chano	no its registered		
office or re agent. I as	egi <b>ste</b> red agent, or both, in the State of mariliar with, and accept the obligations.	f Florida. Such change was ons of, Section 607.0505, Fl	authorized orida Stati	by the corporali	on's board of directors. I hereby accep	I the app	ointmer	nt as registered		
SIGNATURE	Signature, typed or printed mone of registered agent		(F. D	Agent signature require	and the latest and the second of the second	DATE				
12.	OFFICERS AND		13.	Agent signature require	ADDITIONS/CHANGES TO OFFIC		DIREC	TORS IN 12		
TITLE	D	DELETE	1110	LF.			☐ Cha			
NAME	PETERS, WILLI G.		1.2 NA	ME						
STREET ADDRESS	446 BLUEBIRD LN		1.3 ST	REET ADDRESS						
CITY-ST-ZIP	DELRAY BEACH FL		14 01	Y-ST-ZIP						
TITLE	D	☐ DEFELE	21 1/1	LE			☐ Cha	nge 🔲 Addition		
NAME	PETERS, LORRAINE A.		22 NA	ME						
STREET ADDRESS	448 BLUEBIRD LN		2 3 51	REET ADDRESS						
CITY-ST-ZIP	DELRAY BEACH FL		2 4 01	TY-ST-ZIP						
TITLE		☐ DELETE	3 1 <b>T</b> (T	LE			∐ Cha	nge Addition		
NAME			3 2 NA	ME						
STREET ADDRESS			3 3 ST	REFT ADDRESS						
CITY-ST-ZIP		D Decere		Y-ST-ZIP		<del></del>	1 05.			
TITLE		L_) DELETE	4170				L Cha	nge [_] Addition		
NAME			4. 2 N/							
STREET ADDRESS				REET ADDRESS						
CITY-ST-ZIP TITLE		DELETE	4.4 CI	Y-ST-ZIP	<del> </del>		[_] Cha	nge Addition		
NAME		FT pectif	5.1 III				U-10	PA ANDROLL		
STREET ADDRESS				REEL ADDRESS						
CITY-ST-ZIP				Y - \$1 - ZIP						
TITLE		DELETE	61 10				☐ Cha	nge Addition		
NAME			62 NA					-		
STREET ADDRESS			1	REET ADDRESS						
CITY-ST-ZIP				Y-ST-ZIP						
OILL-OL-TH			0.4 011		:- 01' 440 07/0V/) F('d- 0t-1 t					

I do 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 attachment with an address.

WILLI G. PETERS

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2/12-28810