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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # \$84481

1. Corporation Name

MULIC MADTIN DEALTY INC

Principal Place of Business   Mailing Address	MILLIE M	ARTIN REALTY, INC.							
NEW SMYRMA BEACH FL 32168  NEW SMYRMA BEACH FL 32168	Principal Place	of Business	Mailing Address				Ti Milli gitti aiati aiati aiati		
NEW SMYRNA BEACH FL 32168	100 CLUBHOUSE BLVD 100 CLUBHOUSE BLVD								
2. Principal Place of Business	assumes bereit the bases					DO NOT WRITE	IN THIS SDACE		
10/02/1991   10/02/1991   28   28   39   39   39   39   39   39   39   3						201121	IN THIS SPACE		
2. Principal Place of Business 2. 2a. Mailing Address 50-3092035   As Applied For International Control of Part Applicables 50-3092035   As Applied For International Control of Part Applicables 50-3092035   As Applied For International Control of Part Applicables 50-3092035   As Applied For International Control of Part Applicables 50-3092035   As Applied For International Control of Part Applicables 50-3092035   As Applied For International Control of Part Applicables 50-3092035   As Applied For International Control of Part Applicables 50-3092035   Additional Control of Part Applicables 50-3092035   Additional Control of Part Applied For International Control of Part Applied For Internationa						2.			
Suite, Apt. #, etc.			Los Adribiros Addresos	_			App	died For	
Suite, Apt. #, etc.  27   Suite 6   27   Suite 6    28   City & State    29   Country   Zip   Personal Property Tax.   Yes   No   Name and Address of Current Registered Agent   28   Name   ROSS, WILLIAM L. I. R.    ROSS, WILLIAM L. R.   Zit NORTH CAUSEWAY   NEW SMYRNA BEACH FL 32170   28   Street Address (P.O. Box Number is Not Acceptable)    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 to registered diffice 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 diffice 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 diffice 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 diffice 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 diffice 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 807,0505, Florida Statutes.  SIGNATURE  31. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 113.  ADDITIONS/CHANGES T	2. Principal Pl	ace of Business	<u> </u>			T-	<u> </u>		
S. Certificate of Status Desired   See Required						59-3092035			
Trust Fund Contribution   Added to Fees		#, etc.	27 Suits B			5. Certificate of Status Desired	Fee Req	juired	
28     29   Country   Zip   Country   Zip   Country   28   Street Address of Current Registered Agent   Street Address of New Registered Agent   Street Addres	City & State	e	City & State			1			
28	23					Trust Fund Contribution	Added to	Fees	
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  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 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and the purpose of changing its registered agent	Zip	<u> </u>	Zip	_	try				
ROSS, WILLIAM L. JR. 221 NORTH CAUSEWAY NEW SMYRNA BEACH FL 32170  83  City  City  FL  85  City  Cobange  Changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. In the corpor	24	25 29 30		30		1 crochar reporty rax:			
ROSS, WILLIAM L. JR. 221 NORTH CAUSEWAY NEW SMYRNA BEACH FL 32170  82 Street Address (P.O. Box Number is Not Acceptable)  83		9. Name and Address of Current	Registered Agent		201 21	10. Name and Address of New Reg	istered Agent		
221 NORTH CAUSEWAY NEW SMYRNA BEACH FL 32170  82   Street Address (P. D. Box Number is Not Acceptation)  83   84   City   FL   85   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 State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE   Signature, typed or printed name of registered agent and the ril applicable   (NOTE, Regulatorid Agent signature required when reinstaling)   QATE	5000	2 3470 1 3434 1   10		'	Name			ļ	
NEW SMYRNA BEACH FL 32170  83    Ed   City   FL   85   Zip Code	· ·				82 Street Add	Street Address (P.O. Box Number is Not Acceptable)			
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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 attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

Mar 11, 1999 8:00 am Secretary of State

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