

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

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90064 021 ***150.00

DOCUMENT # S86523

1. Corporation Name

MARTIN PROPERTIES AND INVESTMENTS, INC.

Principal Place of Business

1801 S NOVA RD.
S DAYTONA FL 32119-1733

Mailing Address

1801 S NOVA RD.
S DAYTONA FL 32119-1733

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/10/1991

4. FEI Number

59-3184009

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 501 N. Grandview Ave

Suite, Apt. #, etc.

22 Suite 105

City & State

23 Daytona Beach, FL

Zip Country

24 32118

25 US

2a. Mailing Address

26 501 N. Grandview Ave

Suite, Apt. #, etc.

27 Suite 105

City & State

28 Daytona Beach, FL

Zip Country

29 32118

30 US

9. Name and Address of Current Registered Agent

MARTIN, ROBERT D.
501 N. GRANDVIEW AVE
SUITE 105
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME MARTIN, FLOYD M

STREET ADDRESS 1801 S NOVA RD.

CITY-ST-ZIP S DAYTONA FL 32119-1733

TITLE VD ☐ DELETE

NAME MARTIN, RICHARD K

STREET ADDRESS 1801 S NOVA RD.

CITY-ST-ZIP S DAYTONA FL 32119-1733

TITLE STD ☐ DELETE

NAME MARTIN, ROBERT D

STREET ADDRESS 1801 S NOVA RD.

CITY-ST-ZIP S DAYTONA FL 32119-1733

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

501 N. Grandview Ave #105
Daytona Beach, FL 32118

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

501 N. Grandview Ave #105
Daytona Beach, FL 32118

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

501 N. Grandview Ave #105
Daytona Beach, FL 32118

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Robert D. Martin

1/11/99

(904) 238-5577

CR2E034 (11/98)