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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S86770** **(2)**

1. Corporation Name
STOCKTON REALTY GROUP, INC.

Principal Place of Business	Mailing Address
208 PONTE VEDRA PARK DR STE 102 PONTE VEDRA BEACH FL 32082 US	P.O. B OX 1069 PONTE VEDRA BEACH FL 32004-1069

3. Date Incorporated or Qualified: 10/10/1991	3a. Date of Last Report: 04/17/1996
4. FEI Number: 59-3089001	☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes XXX Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

LEE, W. SPERRY JR
208 PONTE VEDRA PARK DR
STE 102
PONTE VEDRA BEACH FL 32082

10. Name and Address of New Registered Agent

81 Name: Keith Watson
82 Street Address (P.O. Box Number is Not Acceptable): 208 Ponte Vedra Park Dr., Suite 101
83
84 City: Ponte Vedra Beach FL 85 Zip Code: 32082

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: Keith Watson X Keith Watson (NOTE: Registered Agent signature required when reinstating) DATE: 3/13/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	~~STOCKTON~~, VICTORIA L	1.2 NAME	McCarley, Victoria L.
STREET ADDRESS	25 LAKE JULIA DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	PONT E VEDRA BEACH FL	1.4 CITY-ST-ZIP	
TITLE	T ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HUTCHESON, NORMA JEAN	2.2 NAME	
STREET ADDRESS	1301 DON QUIXOTE CIRCLE	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	
TITLE	S ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	CAVIN, JILL	3.2 NAME	
STREET ADDRESS	2412 EGRETS GLADE DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP	
TITLE	CPD ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	STOCKTON, JAMES R J	4.2 NAME	
STREET ADDRESS	25 LAKE JULIA DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PONTE VEDRA BEACH FL	4.4 CITY-ST-ZIP	
TITLE	VP XX DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	~~LEE, W SPERRY JR~~	5.2 NAME	
STREET ADDRESS	~~157 KAY WEST WAY~~	5.3 STREET ADDRESS	
CITY-ST-ZIP	~~PONTE VEDRA BEACH FL~~	5.4 CITY-ST-ZIP	
TITLE	VP ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	ALEXANDER, GYPSY Y	6.2 NAME	
STREET ADDRESS	2787 LEMANS CT	6.3 STREET ADDRESS	
CITY-ST-Z	PONTE VEDRA BEAHC FL	6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. 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.

SIGNATURE: James R Stockton 3/13/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #