

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

FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V10153 (7)
 1. Corporation Name
THE GARDENS ON 49TH STREET, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1479 S BLECHER RD STE X LARGO FL 33771 US	Mailing Address PO BOX 1488 LARGO FL 34649 US
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3. Date Incorporated or Qualified 01/29/1992	Applied For <input type="checkbox"/>
4. FEI Number 59-3106017	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 12497 SEMINOLE BLVD. Suite, Apt. #, etc.	2a. Mailing Address 26 P.O. BOX 1488 Suite, Apt. #, etc.
City & State 23 LARGO, FLORIDA	City & State 28 LARGO, FLORIDA
Zip 24 33778	Country 25 U.S.
Zip 29 33779	Country 30 U.S.

9. Name and Address of Current Registered Agent RALEY, DOUGLAS SHOPPING CENTER MARKETING GROUP INC 1479 S BELCHER, STE X LARGO FL 33771		10. Name and Address of New Registered Agent	
81 Name	RALEY, DOUGLAS		
82 Street Address (P.O. Box Number is Not Acceptable)	SHOPPING CENTER MARKETING GROUP		
83	12497 SEMINOLE BLVD.		
84 City	LARGO,	85 State	FL
		86 Zip Code	33778

11. Pursuant to the provisions of Sections 607.0502 and 607.1009, 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: *Douglas Raley* (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RALEY, DOUGLAS	1.2 NAME	
STREET ADDRESS	P.O. BOX 1488	1.3 STREET ADDRESS	
CITY-ST-ZIP	LARGO FL	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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; that 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: *Douglas Raley* 3/18/98 815-526-1000

CR2E034 (10/97)