


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

FILED
Apr 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # V42330 (3) 1. Corporation Name SPECTRUM REALTY, INC.					
Principal Place of Business 1772 PORT ST. LUCIE BLVD. PORT ST. LUCIE FL 34952 US			Mailing Address 1772 PORT ST. LUCIE BLVD. PORT ST. LUCIE FL 34952 US		
2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 06/08/1992	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		3a. Date of Last Report 04/29/1996	
City & State 23		City & State 28		4. FEI Number 65-0338086	
Zip 24		Country 25		Applied For Not Applicable	
Country 25		Country 29		5. Certificate of Status Desired \$8.75 Additional Fee Required	
Country 30		Country 30		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Country 30		Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No	
9. Name and Address of Current Registered Agent PROVO, DAVID 1772 SE PORT ST. LUCIE BLVD. PORT ST. LUCIE FL 34952			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			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP P PROVO, DAVID 3145 SE MONTE VISTE CT. PT ST LUCIE FL 34952			1.1 TITLE NAME STREET ADDRESS CITY - ST - ZIP Change Addition		
1.2 TITLE NAME STREET ADDRESS CITY - ST - ZIP VP PROVO, DAVID 3154 SE MONTE VISTA COURT PORT ST. LUCIE FL			1.2 TITLE NAME STREET ADDRESS CITY - ST - ZIP Change Addition		
1.3 TITLE NAME STREET ADDRESS CITY - ST - ZIP			1.3 TITLE NAME STREET ADDRESS CITY - ST - ZIP Change Addition		
1.4 TITLE NAME STREET ADDRESS CITY - ST - ZIP			1.4 TITLE NAME STREET ADDRESS CITY - ST - ZIP Change Addition		
1.5 TITLE NAME STREET ADDRESS CITY - ST - ZIP			1.5 TITLE NAME STREET ADDRESS CITY - ST - ZIP Change Addition		
1.6 TITLE NAME STREET ADDRESS CITY - ST - ZIP			1.6 TITLE NAME STREET ADDRESS CITY - ST - ZIP Change Addition		
1.7 TITLE NAME STREET ADDRESS CITY - ST - ZIP			1.7 TITLE NAME STREET ADDRESS CITY - ST - ZIP Change Addition		
1.8 TITLE NAME STREET ADDRESS CITY - ST - ZIP			1.8 TITLE NAME STREET ADDRESS CITY - ST - ZIP Change Addition		
1.9 TITLE NAME STREET ADDRESS CITY - ST - ZIP			1.9 TITLE NAME STREET ADDRESS CITY - ST - ZIP Change Addition		
1.10 TITLE NAME STREET ADDRESS CITY - ST - ZIP			1.10 TITLE NAME STREET ADDRESS CITY - ST - ZIP Change Addition		

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)