

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB 16 PM 3:25

DOCUMENT # 242990 (0)

1. Corporation Name  
**EMMER DEVELOPMENT CORP**

Principal Place of Business      Mailing Address  
2801 S.W. ARCHER ROAD      2801 S.W. ARCHER ROAD  
GAINESVILLE FL 32608-1025      GAINESVILLE FL 32608-1025

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/19/1960	3a. Date of Last Report 05/01/1994
21		26		4. FEI Number 59-0934800	Applied For Not Applicable
22	Suits, Apt. #, etc.	27	Suits, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	City & State	28	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Zip	29	Country	7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
EMMER, PHILIP I 2801 S.W. ARCHER RD. GAINESVILLE FL 32608				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City		
				85	Zip Code		
				<b>FL</b>			

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VS	1.1 TITLE	V S D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RELLER, ROBERT H.	1.2 NAME	
STREET ADDRESS	8232 SW 47TH ROAD	1.3 STREET ADDRESS	
CITY - ST - ZIP	GAINESVILLE FL	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EMMER, BARBARA L.	2.2 NAME	
STREET ADDRESS	2736 NW 22ND DRIVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	GAINESVILLE FL	2.4 CITY - ST - ZIP	
TITLE	PD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EMMER, PHILIP I.	3.2 NAME	
STREET ADDRESS	2736 NW 78TH STREET	3.3 STREET ADDRESS	
CITY - ST - ZIP	GAINESVILLE FL	3.4 CITY - ST - ZIP	
TITLE	VST	4.1 TITLE	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOTAIT, JOANNE	4.2 NAME	EUSKEY, JOHN T.
STREET ADDRESS	1605 SW 78TH STREET	4.3 STREET ADDRESS	2801 SW ARCHER ROAD
CITY - ST - ZIP	GAINESVILLE FL	4.4 CITY - ST - ZIP	GAINESVILLE, FL
TITLE	S	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EMMER, JODI L	5.2 NAME	
STREET ADDRESS	4629 NW 20TH AVE	5.3 STREET ADDRESS	" REMOVE "
CITY - ST - ZIP	GAINESVILLE FL	5.4 CITY - ST - ZIP	
TITLE	VS	6.1 TITLE	V S D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCGRIFF, LORI E	6.2 NAME	
STREET ADDRESS	4721 NW 25TH DRIVE	6.3 STREET ADDRESS	
CITY - ST - ZIP	GAINESVILLE FL	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information appearing with this filing is voluntarily furnished and 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 trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if checked, or in an attachment with my additions.

SIGNATURE: [Signature] Robert H. Reller      1-31-95      904-376-2444