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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 302769 (5)
1. Corporation Name
WATSON REALTY CORP.

Principal Place of Business Mailing Address
**11226-1 SAN JOSE BLVD.
JACKSONVILLE FL 32223** **11226-1 SAN JOSE BLVD.
JACKSONVILLE FL 32223**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		28		03/08/1986	02/25/1994
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FBI Number	Applied For
23 City & State		28 City & State		59-1152302	Not Applicable
24 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent				6. Election Campaign Financing Trust Fund Contribution	
WATSON, WILLIAM A. JR. 11226-1 SAN JOSE BLVD. JACKSONVILLE FL 32223				<input type="checkbox"/> \$5.00 May Be Added to Fees	
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 607.0506, Florida Statutes.				8. This corporation has liability for intangible tax under S. 199.002, 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			
WATSON, WILLIAM A. JR. 11226-1 SAN JOSE BLVD. JACKSONVILLE FL 32223				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 607.0506, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S	1. 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WATSON, KEITH	1.2 NAME	
STREET ADDRESS	8825 LILLIAN RD	1.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE, FL 00000	1.4 CITY - ST - ZIP	
TITLE	P	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WATSON, WILLIAM A. JR.	2.2 NAME	
STREET ADDRESS	11226-1 SAN JOSE BLVD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE, FL 00000	2.4 CITY - ST - ZIP	
TITLE	EV	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURR, ROBERT J	3.2 NAME	
STREET ADDRESS	1712 LEE RD	3.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK, FL 00000	3.4 CITY - ST - ZIP	
TITLE	SV	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARLYON, G STEPHEN	4.2 NAME	
STREET ADDRESS	3951 BAYMEADOWS RD	4.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE, FL 00000	4.4 CITY - ST - ZIP	
TITLE	SV	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RANSOM, ROBERT G.	5.2 NAME	
STREET ADDRESS	11226-1 SAN JOSE BLVD.	5.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE, FL 00000	5.4 CITY - ST - ZIP	
TITLE	EV	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STRINGER, HARVEY E.	6.2 NAME	
STREET ADDRESS	3943 BAYMEADOWS ROAD	6.3 STREET ADDRESS	
CITY - ST - ZIP	JAX, FL 32217	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *William A. Jr. Watson* 4-12-95 904-240-0077
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone