

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

FILED
May 06 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 # 416810 (0)
 1. Corporation Name
ITT COMMUNITY REALTY, INC.



Principal Place of Business: **EXECUTIVE OFFICE 1 CORPORATE DRIVE PALM COAST FL 32151**
 Mailing Address: **EXECUTIVE OFFICE 1 CORPORATE DRIVE PALM COAST FL 32151-0001**

3. Date Incorporated or Qualified: **01/15/1973**
 3a. Date of Last Report: **03/07/1996**
 4. FEI Number: **13-2809543**
 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: Yes No

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

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BUTLER, SAMUEL JR.	
STREET ADDRESS	EXECUTIVE OFFICE, 1 CORPORATE DRIVE	
CITY-ST-ZIP	PALM COAST FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	CUFF JR., ROBERT	
STREET ADDRESS	EXECUTIVE OFFICE, 1 CORPORATE DRIVE	
CITY-ST-ZIP	PALM COAST FL	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	BRAUNSTEIN, RICHARD	
STREET ADDRESS	EXECUTIVE OFFICE, 1 CORPORATE DRIVE	
CITY-ST-ZIP	PALM COAST FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	ARMOUR, WILLIAM	
STREET ADDRESS	EXECUTIVE OFFICE, 1 CORPORATE DRIVE	
CITY-ST-ZIP	PALM COAST FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	GARDNER, JAMES E.	
STREET ADDRESS	EXECUTIVE OFFICE, 1 CORPORATE DRIVE	
CITY-ST-ZIP	PALM COAST FL	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	POWERS, RICHARD	
STREET ADDRESS	1330 AVE. OF THE AMERICA	
CITY-ST-ZIP	NEW YORK NY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	T/D CHARLES J. CALLEA
43 STREET ADDRESS	1 CORPORATE DR.
44 CITY-ST-ZIP	PALM COAST, FL 32151
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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: _____ DATE: **4/14/97** **9044452642**

CR2E034 (9/96)