

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

APPROVED
AND
FILED

95 MAY -1 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 674812

(3)

1. Corporation Name

FEDCO REALTY CORP.

Principal Place of Business

Mailing Address

% FEDCO, INC., 629 71ST ST.
P.O. BOX 414258
MIAMI BEACH FL 33141

% FEDCO, INC., 629 71ST ST.
P.O. BOX 414258
MIAMI BEACH FL 33141

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/25/1980

3a. Date of Last Report

07/22/1994

4. FEI Number

59-2233407

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for miscible tax under S. 199.032.

Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUSKIN, LLOYD L
629 71ST ST
P.O. BOX 414258
MIAMI BEACH FL 33141

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 of person acting as registered agent and the filer)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	ASD
NAME	MULTACK, JOELLEN
STREET ADDRESS	629 71ST ST
CITY, ST, ZIP	MIAMI BEACH FL
TITLE	VCD
NAME	RUSKIN, LLOYD L
STREET ADDRESS	629 71ST ST
CITY, ST, ZIP	MIAMI BEACH FL
TITLE	CTD
NAME	DAVIDSON, JOSEPH H.
STREET ADDRESS	629 71ST ST
CITY, ST, ZIP	MIAMI BEACH FL
TITLE	PD
NAME	MULTACK, WILLIAM
STREET ADDRESS	629 71ST ST
CITY, ST, ZIP	MIAMI BEACH FL
TITLE	SD
NAME	DAVIDSON, ISABEL
STREET ADDRESS	629 71ST ST
CITY, ST, ZIP	MIAMI BEACH FL
TITLE	ASD
NAME	RUSKIN, CANDACE
STREET ADDRESS	629 71ST ST
CITY, ST, ZIP	MIAMI BEACH FL

14 TITLE	☐ Change ☐ Addition
15 NAME	
16 STREET ADDRESS	
17 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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)(a), 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:

[Handwritten Signature]

Signature and typed name of filer or signing officer on director

305
4/10/95 865-4482