

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 MAR 27 PM 4:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H34062 (0)

1. Corporation Name
VANDERBILT REALTY, INC.

Principal Place of Business
C/O PHILLIP M. FRANCOEUR, SR.
2335 TAMAMI TRAIL N. #510
NAPLES FL 33940

Mailing Address
C/O PHILLIP M. FRANCOEUR, SR.
2335 TAMAMI TRAIL N. #510
NAPLES FL 33940

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 12/14/1984	3a. Date of Last Report 02/14/1994
4. FEI Number 59-2569636	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 765 SEAGATE DRIVE	2a. Mailing Address 2b 765 SEAGATE DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State 23 NAPLES, FL	City & State 28 NAPLES, FL
Zip 24 33940	Country 25
Country 29 33940	Country 30

9. Name and Address of Current Registered Agent FRANCOEUR, PHILIP M., SR. CHARLES 2335 TAMAMI TRAIL N. #510 NAPLES FL 33940		10. Name and Address of New Registered Agent 81 Name CHARLES M. KELLY, JR., WA 82 Street Address (P.O. Box Number is Not Acceptable) 2640 GOLDEN GATE PARKWAY # 315 83 84 NAPLES, FL 85 Zip Code 33941	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1502, 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 607.0502, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 3/20/95
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	FRANCOEUR, PHILIP M., SR 2335 TAMAMI TR. N. #510 NAPLES FL	1.1 TITLE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME D. BRUCE BERKINSHAW	
STREET ADDRESS		1.3 STREET ADDRESS 71 765 SEAGATE DR.	
CITY-ST-ZIP		1.4 CITY-ST-ZIP NAPLES, FL 33940	
TITLE SD	FRANCOEUR, PHILIP M., JR 2375 N TAMAMI TR 308 NAPLES FL	2.1 TITLE SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME CHARLES M. KELLY, JR.	
STREET ADDRESS		2.3 STREET ADDRESS 2640 GOLDEN GATE PKWAY # 315	
CITY-ST-ZIP		2.4 CITY-ST-ZIP NAPLES, FL 33941	
TITLE VT	WARPLE, JANICE F 824-102ND AVENUE NORTH NAPLES FL	3.1 TITLE TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME JANICE F. WARPLE	
STREET ADDRESS		3.3 STREET ADDRESS 24 102ND AVENUE N.	
CITY-ST-ZIP		3.4 CITY-ST-ZIP NAPLES, FL	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 110.07(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 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 3/20/95 TELEPHONE: 813-566-1410
(NOTE: Registered Agent signature required when reappointing)