

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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APPROVED
AND
FILED

95 MAY -1 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J23683

(2)

1. Corporation Name

REALTY NORTH, INC.

Principal Place of Business

2804-B REMINGTON GREEN CIRCLE
SUITE B
TALLAHASSEE FL 32308
US

Mailing Address

2804-B REMINGTON GREEN CIRCLE
SUITE B
TALLAHASSEE FL 32308
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/11/1986

3a. Date of Last Report

04/29/1994

4. FEI Number

59-3141804

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

9. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

24. Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28. Zip

Country

10. Name and Address of New Registered Agent

81. Name

JOE MANAUSA

82. Street Address (P.O. Box Number is Not Acceptable)

3660 Las Brisas

83.

84. City

Tallahassee

FL

85. Zip Code

32308

9. Name and Address of Current Registered Agent

IGLER, A. GEORGE
315 SOUTH GULFVIEW STREET
SUITE 701
TALLAHASSEE FL 32301

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

Joe Manausa

2/9/95

Signature, typed or printed name of registered agent and title if acceptable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

P
WHETSEL, DOROTHEA
3055 CARLOW CIR
TALLAHASSEE FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
CRONA SYNTIA P.
2804-B REMINGTON GREEN CIRCLE
TALLAHASSEE FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VPST
MANAUSA, JOSEPH P.
3660 LAS BRISAS
TALLAHASSEE FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

VICE - PRESIDENT
Whetsel, Dorothea
3065 Carlow Circle
Tallahassee, FL 32308

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

PRESIDENT/SECRETARY/TREAS.
Manausa, Joseph P.
2804-B Remington Green Circle
Tallahassee, FL 32308

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☒ Change ☐ Addition

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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)(b), Florida Statutes. I further certify that the information indicated on this annual report is a supplemental annual report in 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; that I am a 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 my attachment with an address.

SIGNATURE:

Joe Manausa
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph P. Manausa

2/9/95 (904) 385-6936