

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000012233 (0)**

1. Corporation Name

BUYER'S FRIEND REALTY, INC.



Principal Place of Business

**9471 BAYMEADOWS ROAD
SUITE 201
JACKSONVILLE FL 32256**

Mailing Address

**9471 BAYMEADOWS ROAD
SUITE 201
JACKSONVILLE FL 32256**

3. Date Incorporated or Qualified
02/14/1994

3a. Date of Last Report
05/01/1995

4. FEI Number
59-3290472

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**BLOODWORTH, NANCY P
9471 BAYMEADOWS RD.
SUITE 201
JACKSONVILLE FL 32256**

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 (Type or print name, giving Title, if applicable)

(NOTE: Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DPST
BLOODWORTH, NANCY P
9471 BAYMEADOWS RD., STE. 201
JACKSONVILLE FL 32256** DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
**SEC
BARBARA L. CLARKE
7632 Southside BLVD. Apt. 276
JACKSONVILLE, Florida 32256** Change Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP Change Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP Change Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP Change Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
**000001797820
-04/29/96--01026--040
***800.00** Change Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP Change Addition

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: *Nancy P. Bloodworth*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
NANCY P. Bloodworth

April 24, 1996 904-737-1965
Date Date of Filing

CR2E034 (12/95)