

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000078730 (6)

1. Corporation Name

CAPITAL REALTY INVESTMENT, INC.

Principal Place of Business

1555 PALM BEACH LAKES BLVD.
SUITE 1006
WEST PALM BEACH FL 33401

Mailing Address

1555 PALM BEACH LAKES BLVD.
SUITE 1006
WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/26/1994

3a. Date of Last Report

4. FEI Number

☒ 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

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

VEGOSEN, DEAN
500 S. AUSTRALIAN AVE.
10TH FLOOR
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name
SHELTON, GILBERT
82 Street Address (P.O. Box Number is Not Acceptable)
1555 Palm Beach Lakes Blvd.
83 Suite 1006
84 City
West Palm Beach
85 State
FL
86 Zip
33401

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

S. Shelton, Gilbert + Shelton, Vice President

4/29/95

Signature, type or print name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
D
NAME
VEGOSEN, DEAN
STREET ADDRESS
500 S. AUSTRALIAN AVE., 10TH FLOOR
CITY - ST - ZIP
WEST PALM BEACH FL 33401

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

11 TITLE
D/P
12 NAME
HEITMEYER, RICHARD
13 STREET ADDRESS
1555 Palm Beach Lakes Blvd., Suite 1006
14 CITY - ST - ZIP
West Palm Beach, FL 33401

21 TITLE
D/V
22 NAME
SHELTON, GILBERT
23 STREET ADDRESS
1555 Palm Beach Lakes Blvd., Suite 1006
24 CITY - ST - ZIP
West Palm Beach, FL 33401

31 TITLE
T
32 NAME
GREENE, LAURENCE C.
33 STREET ADDRESS
1555 Palm Beach Lakes Blvd., Suite 1006
34 CITY - ST - ZIP
West Palm Beach, FL 33401

41 TITLE
S
42 NAME
THOMAS, SHEREE
43 STREET ADDRESS
1555 Palm Beach Lakes Blvd., Suite 1006
44 CITY - ST - ZIP
West Palm Beach, FL 33401

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE
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 118.07(3)(b), 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:

S. Shelton, V.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/95

(407)689-9700

Date

(Typed Name)