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PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000014696 (5)**

1. Corporation Name

ALL POINTS REAL ESTATE, INC.



Principal Place of Business

1216 N MLK JR BLVD
TALLAHASSEE FL 32303

Mailing Address

1216 N MLK JR BLVD
TALLAHASSEE FL 32303

2. Principal Place of Business

2a. Mailing Address

21 2030-2 THOMASVILLE ROAD

26 SAME

Suite, Apt. #, etc.

State, Apt. #, etc.

22

City & State

27

City & State

23 TALLAHASSEE FL.

28

City & State

24 32312

Country

29

Zip

Country

9. Name and Address of Current Registered Agent

EARNHART, PAUL M
1216 N MLK JR BLVD
TALLAHASSEE FL 32303

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

2030-2 THOMASVILLE ROAD

83

84 City TALLAHASSEE

FL

85 Zip Code 32312

11. Pursuant to the provisions of Sections 607.007 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 607.009, Florida Statutes.

SIGNATURE

Paul M. Earnhart

PAUL M. EARNHART

2-6-96

12. OFFICERS AND DIRECTORS

TITLE NAME [] DELETE

PAUL M. EARNHART

2030-2 THOMASVILLE ROAD

TALLAHASSEE FL. 32312

TITLE NAME [] DELETE

SECRETARY/

FRANCES W. HARLEY

2030-2 THOMASVILLE ROAD

TITLE NAME [] DELETE

TALLAHASSEE FL. 32312

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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14. I do hereby certify that the information supplied on 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 included 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 I am past, or am currently, an officer or director.

SIGNATURE: *Paul M. Earnhart*
PRESIDENT AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
PAUL M. EARNHART

2-6-96 904-386-2773
S(5)-41-8-96

CR2E034 (12/95)