

2-15-95 B-1240-C
FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
 ANNUAL REPORT
 1995



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

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

DOCUMENT # 206951 (6)

95 FEB 15 PM 3:08

1. Corporation Name
COLONY ESTATES INC

Principal Place of Business Mailing Address
C/O EDWARD J. ACHTNER **C/O EDWARD J. ACHTNER**
8 PIPPIN WOOD DR. **8 PIPPIN WOOD DR.**
NEW HARTFORD NY 13413-2448 **NEW HARTFORD NY 13413-2448**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **10/22/1957** 3a. Date of Last Report **10/05/1994**

21. Principal Place of Business	2a. Mailing Address	4. FEI Number 11-6019817	Applied For <input type="checkbox"/> Not Applicable
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. City & State	28. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Zip	25. Country	29. Zip	30. Country
2. Principal Place of Business		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
NORELLI, NANCY 28 WEST FLAGLER STREET., 1110 MIAMI FL 33130				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83.			
				84. City	FL	85. Zip Code	

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, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ACHTNER, EDWARD	1.2 NAME	
STREET ADDRESS	8 PIPPIN WOOD DR.	1.3 STREET ADDRESS	
CITY - ST - ZIP	NEW HARTFORD NY 13413 - 2448	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REINLY, JOHN V <i>Deceased</i>	2.2 NAME	
STREET ADDRESS	462 MORICHES RD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	ST. JAMES NY 11780	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALIGUNDA, WALTER	3.2 NAME	
STREET ADDRESS	576 BELLMORE RD.	3.3 STREET ADDRESS	
CITY - ST - ZIP	EAST MEADOW NY 11554	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, THELMA	4.2 NAME	
STREET ADDRESS	27 HILL DR.	4.3 STREET ADDRESS	
CITY - ST - ZIP	OYSTER BAY NY 11771	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PLATT, RAYMOND	5.2 NAME	
STREET ADDRESS	127 LITTLE PLAINS RD.	5.3 STREET ADDRESS	
CITY - ST - ZIP	HUNTINGTON NY 11743	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 119.07(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 of this report or on an attachment with my address.

SIGNATURE: *[Signature]* SECRETARY **1-31-95 (315) 797-0322**
 (EDWARD) ACHTNER