FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 11:03

DOCUMENT # 391742 (4)

1. Corporation Name
TRAFFORD PINE ESTATE, INC.

Principal Place of Business	Mailing Address
1401 CORUNA AVE CORAL GABLES FL 33156	1401 CORUNA AVE CORAL GABLES FL 33156

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/22/1971
3a. Date of Last Report: 02/03/1994

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.: 1111 N. 11 ST.	27 Suite, Apt. #, etc.: 1111 N. 11 ST.
23 City & State: IMMOKALEE FL.	28 City & State: IMMOKALEE FL.
24 Zip: 33934 Country: 25	29 Zip: 33934 Country: 30

4. FEI Number: 59-1429941 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
DICK, JOHN C 7600 RED RD SOUTH MIAMI FL 33134	81 Name: DICK, ROGER A. 82 Street Address (P.O. Box Number is Not Acceptable): 1111 NORTH 11 ST. 83 IMMOKALEE FL. 33934 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: ROGER A. DICK PD — 2-15-95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	DICK, ROGER A	1.2 NAME	DICK, ROGER A. (ONLY)	
STREET ADDRESS	1401 CORUNA AVE	1.3 STREET ADDRESS	1111 N. 11 ST.	
CITY-ST-ZIP	CORAL GABLES FL	1.4 CITY-ST-ZIP	IMMOKALEE FL. 33934	
TITLE	D	2.1 TITLE	SD	☒ Change ☐ Addition
NAME	BROWNELL, E R	2.2 NAME	DICK, ROGER ADOLPH	
STREET ADDRESS	3152 CORAL WAY	2.3 STREET ADDRESS	1401 CORUNA AVE.	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	CORAL GABLES FL. 33156	
TITLE	D	3.1 TITLE		☒ Change ☐ Addition
NAME	DICK, JOHN C	3.2 NAME		
STREET ADDRESS	7600 RED RD	3.3 STREET ADDRESS		
CITY-ST-ZIP	SO. MIAMI FL	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE		☒ Change ☐ Addition
NAME	DICK, ADOLPH A.	4.2 NAME		
STREET ADDRESS	7600 RED RD	4.3 STREET ADDRESS		
CITY-ST-ZIP	SO. MIAMI FL	4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ 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)(i), 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: ROGER A. DICK PD — 2-15-95 — 6574228
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — (Internal Control #)

0160101 CP