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

CORPORATION ANNUAL REPORT



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

1996

	1000	=:110:0710			
DOCU 1. Corporatio	MENT # 39559	6 (0)			
	ART REALTY & CONST., IN	IC.			
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Dringing) Diago	- A D				
Principal Place of Business		Mailing Address			
1211 - 6TH STREIT, SW WINTER HAVEN FL 33880		1211 - 6TH STREET, SW WINTER HAVEN FL 33880			
				2. Data isosmaratad as O. alfad	10- D
				3. Date Incorporated or Qualified 02/09/1972	3a. Date of Last Report 08/04/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		26		59-1380352	Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation has liability for Florida Statutes Yes	intangible tax under s 199.032,
	9. Name and Address of Currer		130	10. Name and Address of New F	_
A			81 Name		
	RT, ARTHUR E. Dalmont road		82 Street Add	ress (P.O. Box Number is Not Acceptate	ole)
	HAVEN FL 33880		83		
************	THILLIT C SOUD				
			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the above-named corpor	ration submits this statement for the pured of directors. I hereby accept the app	
familiar wit	th, and accept the obligations of, Sect	tion 607.0505, Florida Statute	zed by the corporation's boa. s.	10 of directors. I hereby accept the app	ointment as registered agent. I am
SIGNATURE .	Signature, typed or printed name of registered agent	and title if annicable Au	OTE: Registered Agent signature require		
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
TITLE	OTEMADE ADTUNDE	☐ DELETE	1. 1 TITLE		☐ Change ☐ Addition
NAME	STEWART, ARTHUR E. 225 RYDALMONT RD., SE		1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	WINTER HAVEN FL		1.3 STREET ADDRESS		
TITLE	V	☐ DELETE	1.4 CITY - ST - ZIP 2. 1 TITLE		Change Addition
NAME	STEWART, GARY E	_	2 2 NAME		E cualdo El nocinen
STREET ADDRESS	360 24TH ST NW		2 3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL SY	D 05:475	2 4 CITY-ST-ZIP		
TITLE NAME	SYEWART, MINNIE	DELETE .	3 1 TITLE		Change Addition
STREET ADDRESS	225 RYDALMONT DR SE		3.2 NAME		
CITY-ST-ZIP	WINTER HAVEN FL		3.3 STREET ADDRESS 3.4 CITY - ST - ZIP		
TITLE		☐ DELETE	4. 1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 City-St-ZiP		
NAME		[] pereie	5.1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-7IP			5.4 CITY-ST-ZIF		
TITLE		☐ DELETE	6. 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP	certify that the information symptodic	with this films is untimestable.	64 CiTY-ST-ZIP	or the exemption stated in Section 119.	
	reservation of the morniagon aupplied v	viol one many is voluntarily fulf	iisiidu ariu uues not quality to	я тле exemption stated in Section 119.0	17(3)(kl. Florida Statutes, Lifurther

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: Attur Little ARTHUR STEWART 4-27-96 (941) 294-6994