

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 419888

(3)

1. Corporation Name

STRAND REALTY, INC.



Principal Place of Business

Mailing Address

22568 ESPLANADA CIRCLE
SUITE 2-305
BOCA RATON FL 33433
US

22568 ESPLANADA CIRCLE
SUITE 2-305
BOCA RATON FL 33433
US

3. Date Incorporated or Qualified
02/26/1973

3a. Date of Last Report
07/11/1995

2. Principal Place of Business

2a. Mailing Address

21 309 NE 1ST STREET
Suite, Apt. #, etc

26 5503 S.W. 84 DR.
Suite, Apt. #, etc

4. FEI Number
59-1512922

Applied For
Not Applicable

22 City & State

27 City & State

23 GAINESVILLE FL.

28 GAINESVILLE FL.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 32601 Zip

25 ALACHUA Country

29 32608 Zip

30 ALACHUA Country

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

LEVINE, RICHARD
22568 ESPLANADA CIRCLE
SUITE 2-305
BOCA RATON FL 33433

81 Name RICHARD LEVINE
82 Street Address (P.O. Box Number is Not Acceptable) 309 NE 1ST STREET
83
84 City GAINESVILLE FL

85 Zip Code 32601

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 resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSD
NAME LEVINE, RICHARD
STREET ADDRESS 22568 ESPLANADA CIRCLE
CITY-ST-ZIP BOCA RATON FL

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
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 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

RICHARD LEVINE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/96 382-377-4472
Daytime Phone #

CR2E034 (3/96)