

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathar
Secretary of State
Tallahassee, Florida 32399-0400

**APPROVED
AND
FILED**

95 MAY -1 AM 8:09

DOCUMENT # **438283**

(4)

REALTY SERVICES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business: 12800 UNIVERSITY DR SUITE 350 FORT MYERS FL 33907-5343 US
Mailing Address: 12800 UNIVERSITY DR SUITE 350 FORT MYERS FL 33907-5343 US

2. Principal Place of Business: 21 26. Mailing Address: 26
22. State: 27. State: 27
23. City & State: 28. City & State: 28
24. Zip: 25. County: 29. Zip: 30. County: 30

3. Date Incorporated or Qualified: 10/16/1973
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1493955
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. This corporation is eligible for municipal tax under 5-189.03a, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: ASHBY, CHARLES C 12800 UNIVERSITY DR SUITE 350 FT MYERS FL 33907
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code: FL

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 607.0509 Florida Statutes.

SIGNATURE: _____ (Date) _____ (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11.1 TITLE: VP	11.2 NAME: KENNEDY, JOSEPH J	11.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.3 STREET ADDRESS: 12800 UNIVERSITY DR. #350	11.4 CITY, ST, ZIP: FT MYERS FL	11.3 STREET ADDRESS:	
11.1 TITLE: PD	11.2 NAME: ASHBY, CHARLES A.	11.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.3 STREET ADDRESS: 12800 UNIVERSITY DR #350	11.4 CITY, ST, ZIP: FT. MYERS FL	11.3 STREET ADDRESS:	
11.1 TITLE:	11.2 NAME:	11.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.3 STREET ADDRESS:	11.4 CITY, ST, ZIP:	11.3 STREET ADDRESS:	
11.1 TITLE:	11.2 NAME:	11.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.3 STREET ADDRESS:	11.4 CITY, ST, ZIP:	11.3 STREET ADDRESS:	
11.1 TITLE:	11.2 NAME:	11.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11.3 STREET ADDRESS:	11.4 CITY, ST, ZIP:	11.3 STREET ADDRESS:	

14. I, the undersigned, hereby certify that the information supplied with this filing is voluntarily furnished and correct and agrees that the corporation is in compliance with Section 119.11(1)(b), 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. I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of changes or as an addendum with an address.

SIGNATURE: *Charles C. Ashby* Charles C. Ashby 4/28/95 (813) 489-1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR