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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 468855 (2)

1. Corporation Name

ERROL REALTY, INC.



Principal Place of Business

Mailing Address

~~30 SKYLINE DRIVE~~  
LAKE MARY FL 32746  
US

~~30 SKYLINE DRIVE~~  
LAKE MARY FL 32746  
US

3. Date Incorporated or Qualified

01/31/1975

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21 2170 W SR 434

2a. Mailing Address

26 2170 W SR 434

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Ste 420

27 Ste 420

City & State

City & State

23 Longwood, FL

28 Longwood, FL

Zip

Country

Zip

Country

24 32779

25 USA

29 32779

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOWD, E. MICHAEL  
30 SKYLINE DRIVE  
LAKE MARY FL 32746

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ST  
NAME DOWD, D DOUGLAS  
STREET ADDRESS 14 OLDE SPRINGS RD.  
CITY - ST - ZIP COLUMBIA SC

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

TITLE P  
NAME DOWD, E MICHAEL  
STREET ADDRESS 734 FAIR OAKS LANE  
CITY - ST - ZIP MAITLAND FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

E Michael Dowd

President, Errol Realty

Date

Daytime Phone #

4/29/96 865-6265

CR2E034 (12/95)