

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

95 MAY 11 AM 8:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 491784

(5)

1. Corporation Name:

FLORDECO REALTY, INC.

DO NOT WRITE IN THIS SPACE

3. Date the corporation or qualified	3a. Date of Last Report
12/01/1975	04/25/1994
4. FID Number	Applied For
59-1984345	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
B. This corporation has liability for intangible tax under Section 198.04, Florida Statutes.	
☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
3591 FOWLER STREET P.O. BOX 6966 FORT MYERS FL 33911	3591 FOWLER STREET P.O. BOX 6966 FORT MYERS FL 33911
21. Date of Report	26. State of Report
22. City & State	27. City & State
23. City	28. State
24. City	29. State
25. City	30. State

9. Name and Address of Current Registered Agent

GOLDBERG, HARVEY B.
2201 MAIN ST.
FT. MYERS FL

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	FL

11. Pursuant to the provisions of Sections 607.04(2) and 607.15(4), 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 607.04(2), Florida Statutes.

SIGNATURE

(Signature of Registered Agent)

(Signature of Registered Agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. NAME	SD GOLDBERG, MORTON A 3591 FOWLER ST. FT MYERS, FL 00000	11. NAME	☐ Change ☐ Addition
12. NAME	CD CRONIN, THOMAS R. 3591 FOWLER ST. FT MYERS, FL 00000	12. NAME	☐ Change ☐ Addition
13. NAME	PD FOX, ALLAN E. 3591 FOWLER ST. FT. MYERS FL	13. NAME	☐ Change ☐ Addition
14. NAME		14. NAME	☐ Change ☐ Addition
15. NAME		15. NAME	☐ Change ☐ Addition
16. NAME		16. NAME	☐ Change ☐ Addition
17. NAME		17. NAME	☐ Change ☐ Addition
18. NAME		18. NAME	☐ Change ☐ Addition
19. NAME		19. NAME	☐ Change ☐ Addition
20. NAME		20. NAME	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.04(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. That any officer or director of this corporation at the moment of filing this report is required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of Block 13 of this report, or on any other filing with an addition.

SIGNATURE:

Thomas R. Cronin

Thomas R. Cronin
Chairman

5/8/95 813-936-8888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Signature of Agent)