

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 500465 (0)

1. Corporation Name

PREMIER REAL ESTATE CORPORATION



Principal Place of Business

2630 ENTERPRISE ROAD
CLEARWATER FL 34623

Mailing Address

2630 ENTERPRISE ROAD
CLEARWATER FL 34623

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified

04/05/1976

3a. Date of Last Report

05/01/1995

4. FET Number

59-1692882

Applied For

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

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

BROWN, ELAINE E
2630 ENTERPRISE RD
CLEARWATER, FL
34623

81 Name

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

83

84 City

FL

85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if a separate person)

(If the Registered Agent is the corporation, this space is to be left blank)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME BROWN, INGRID G.
STREET ADDRESS 1598 SANDALWOOD DR
CITY- ST- ZIP DUNEDIN FL

1. TITLE Change Addition
2. NAME
3. STREET ADDRESS
4. CITY- ST- ZIP

TITLE DELETE
NAME BROWN, ELAINE E.
STREET ADDRESS 1159 ROHE STREET
CITY- ST- ZIP TARPON SPRINGS FL

2. TITLE Change Addition
3. NAME
4. STREET ADDRESS
5. CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

3. TITLE Change Addition
4. NAME
5. STREET ADDRESS
6. CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

4. TITLE Change Addition
5. NAME
6. STREET ADDRESS
7. CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

5. TITLE Change Addition
6. NAME
7. STREET ADDRESS
8. CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

6. TITLE Change Addition
7. NAME
8. STREET ADDRESS
9. CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

7. TITLE Change Addition
8. NAME
9. STREET ADDRESS
10. 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: *Ingrid G. Brown* DATE: 4/30/96 (813) 797-8612
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)