

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MAXIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

95 JUN 22 AM 9:40

DOCUMENT # 501285 (1)

1. Corporation Name
PARKWOODS REALTY AND DEVELOPMENT CO.

Principal Place of Business	Mailing Address
1391-4 MEADOW PARK LANE FT MYERS FL 33901 US	1391-4 MEADOW PARK LANE FT MYERS FL 33901 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/15/1976	3a. Date of Last Report 04/19/1994
4. FEI Number 59-1678348	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 195.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
Zip	Country
29	30

9. Name and Address of Current Registered Agent

**MALT, DAVID G.
 1601 RED CEDAR DRIVE
 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
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. 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 the filer applicant) (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALT, DAVID G.	1.2 NAME	
STREET ADDRESS	1601 RED CEDAR DR	1.3 STREET ADDRESS	1391-4 Meadow Park Ln
CITY - ST - ZIP	FT MYERS, FL 00000	1.4 CITY - ST - ZIP	FT MYERS, FL 33901
TITLE	TD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALT, ROBERT C	2.2 NAME	
STREET ADDRESS	103 OLYMPUS WAY	2.3 STREET ADDRESS	600 Roseland Drive
CITY - ST - ZIP	JUPITER, FL 00000	2.4 CITY - ST - ZIP	West Palm Beach, FL
TITLE	ASD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALT, C RICHARD	3.2 NAME	
STREET ADDRESS	1620 N US HWY ONE	3.3 STREET ADDRESS	
CITY - ST - ZIP	JUPITER, FL 00000	3.4 CITY - ST - ZIP	
TITLE	VD	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALT, MILDRED B	4.2 NAME	
STREET ADDRESS	1409 1 MEADOW PARK LANE	4.3 STREET ADDRESS	1391-4 Meadow Park Lane
CITY - ST - ZIP	FT MYERS, FL 00000	4.4 CITY - ST - ZIP	Fort Myers, FL 33901
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 110.07(3)(b), 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 the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or of an appointment with an address.

SIGNATURE: David G. Malt Date: 6/6/95 File No: 813-9366724

CR2E034 (3/95)