

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

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED

95 JUL 28 AM 7: 35

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 512742 (8)

1. Corporation Name

FLORIDA REAL ESTATE COMPANY OF ORLANDO

Principal Place of Business

800 N. FERNCREEK
P.O. BOX 7242, ORLANDO, FL 32854
ORLANDO FL 32803
US

Mailing Address

POST OFFICE BOX 547242
P.O. BOX 7242, ORLANDO, FL 32854
ORLANDO FL 32854
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/21/1976

3a. Date of Last Report

06/20/1994

4. FEI Number

59-1700661

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

2. Principal Place of Business

21

Suite, Apt. #, etc

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

Zip

Country

30

9. Name and Address of Current Registered Agent

GUERNSEY, VIRGINIA L.
1216 EASTIN AVE
ORLANDO FL 32804

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: Type or printed name of registered agent and the corporation)

(Date: Registered Agent signature required when submitting)

(Date)

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

PST
GUERNSEY, VIRGINIA L.
1216 EASTIN AVENUE
ORLANDO, FL 00000

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

VD
HUEY, ENDERS P
1069 EDGEWATER DR
ORLANDO, FL 00000

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D
GUERNSEY, JOSEPH WELBURN
2070 ROYAL OAK COURT
ORLANDO FL

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

☐ 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 19.07(2)(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 this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

Virginia L. Guernsey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Virginia L. Guernsey

7-24-95 (407) 422-5654