


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 16 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS																																																																																																																									
<b>DOCUMENT # 542941 (0)</b> 1. Corporation Name <b>HUDSON REALTY CO.</b>																																																																																																																													
Principal Place of Business <b>43 W. GRANADA ORMOND BCH. FL 32174 US</b>			Mailing Address <b>P.O. BOX 1506 ORMOND BEACH FL 32175-1506 US</b>																																																																																																																										
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified <b>08/15/1977</b> 3a. Date of Last Report <b>04/23/1996</b> 4. FEI Number <b>59-1757047</b> 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																																																																																																									
9. Name and Address of Current Registered Agent <b>HUDSON, MARION F 43 W. GRANADA BLVD. ORMOND BCH. FL 32174</b>			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing) DATE</small>																																																																																																																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3">12. OFFICERS AND DIRECTORS</th> <th colspan="3">13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</th> </tr> <tr> <td style="width: 33%;">TITLE</td> <td style="width: 33%;">NAME</td> <td style="width: 33%; text-align: right;">DELETED</td> <td style="width: 33%;">1.1 TITLE</td> <td style="width: 33%;">NAME</td> <td style="width: 33%; text-align: right;">Change Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>STREET ADDRESS</td> <td></td> <td>1.2 NAME</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>CITY-STATE-ZIP</td> <td></td> <td>1.3 STREET ADDRESS</td> <td>1.4 CITY-STATE-ZIP</td> <td>Change Addition</td> </tr> <tr> <td>TITLE</td> <td>ST</td> <td>DELETED</td> <td>2.1 TITLE</td> <td>NAME</td> <td>Change Addition</td> </tr> <tr> <td>NAME</td> <td>NATZEL, LORENE</td> <td></td> <td>2.2 NAME</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>216 TIMBERLANE TRAIL</td> <td></td> <td>2.3 STREET ADDRESS</td> <td>2.4 CITY-STATE-ZIP</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>ORMOND BCH. FL</td> <td></td> <td>3.1 TITLE</td> <td>NAME</td> <td>Change Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td>DELETED</td> <td>3.2 NAME</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>3.3 STREET ADDRESS</td> <td>3.4 CITY-STATE-ZIP</td> <td>Change Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>4.1 TITLE</td> <td>NAME</td> <td>Change Addition</td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> <td>4.2 NAME</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>DELETED</td> <td>4.3 STREET ADDRESS</td> <td>4.4 CITY-STATE-ZIP</td> <td>Change Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>5.1 TITLE</td> <td>NAME</td> <td>Change Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>5.2 NAME</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> <td>5.3 STREET ADDRESS</td> <td>5.4 CITY-STATE-ZIP</td> <td>Change Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td>DELETED</td> <td>6.1 TITLE</td> <td>NAME</td> <td>Change Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>6.2 NAME</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>6.3 STREET ADDRESS</td> <td>6.4 CITY-STATE-ZIP</td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			TITLE	NAME	DELETED	1.1 TITLE	NAME	Change Addition	STREET ADDRESS	STREET ADDRESS		1.2 NAME	STREET ADDRESS		CITY-STATE-ZIP	CITY-STATE-ZIP		1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP	Change Addition	TITLE	ST	DELETED	2.1 TITLE	NAME	Change Addition	NAME	NATZEL, LORENE		2.2 NAME	STREET ADDRESS		STREET ADDRESS	216 TIMBERLANE TRAIL		2.3 STREET ADDRESS	2.4 CITY-STATE-ZIP		CITY-STATE-ZIP	ORMOND BCH. FL		3.1 TITLE	NAME	Change Addition	TITLE		DELETED	3.2 NAME	STREET ADDRESS		NAME			3.3 STREET ADDRESS	3.4 CITY-STATE-ZIP	Change Addition	STREET ADDRESS			4.1 TITLE	NAME	Change Addition	CITY-STATE-ZIP			4.2 NAME	STREET ADDRESS		TITLE		DELETED	4.3 STREET ADDRESS	4.4 CITY-STATE-ZIP	Change Addition	NAME			5.1 TITLE	NAME	Change Addition	STREET ADDRESS			5.2 NAME	STREET ADDRESS		CITY-STATE-ZIP			5.3 STREET ADDRESS	5.4 CITY-STATE-ZIP	Change Addition	TITLE		DELETED	6.1 TITLE	NAME	Change Addition	NAME			6.2 NAME	STREET ADDRESS		STREET ADDRESS			6.3 STREET ADDRESS	6.4 CITY-STATE-ZIP		CITY-STATE-ZIP					
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Marion Franklin Hudson</i> (President) SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>4-11-1997 (904)672-0001</b> <small>Date Daytime Phone</small>																																																																																																																													



CR2E034 (9/96)