

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

**FILED**  
Mar 07 1996 8:00 am  
Secretary of State

DOCUMENT # **543799** (1)

1. Corporation Name  
**SUNSTATES REALTY GROUP, INC.**



Principal Place of Business Mailing Address  
**4600 MARRIOTT DRIVE SUITE #200**  
**P. O. BOX 30043**  
**RALEIGH NC 27622**

3. Date Incorporated or Qualified **08/24/1977** 3a. Date of Last Report **02/07/1995**

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

4. FEI Number **59-1766299** 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**

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.**  
**1201 HAYS STREET**  
**SUITE 105**  
**TALLAHASSEE FL 32301**

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 \_\_\_\_\_ (NOTE: Signature of Agent is required when registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD LEONARD, RICHARD A. 4600 MARRIOTT DR. RALEIGH NC	1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2 NAME	
STREET ADDRESS		3 STREET ADDRESS	
CITY - ST - ZIP		4 CITY - ST - ZIP	
TITLE	TD KENNEDY, GLENN J. 4600 MARRIOTT DR. RALEIGH NC	5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6 NAME	
STREET ADDRESS		7 STREET ADDRESS	
CITY - ST - ZIP		8 CITY - ST - ZIP	
TITLE	S PAYNE, CLAIR K. 4600 MARRIOTT DR. RALEIGH NC	9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		10 NAME	
STREET ADDRESS		11 STREET ADDRESS	
CITY - ST - ZIP		12 CITY - ST - ZIP	
TITLE	D MORTENSON, LEE N. 55 EAST MONROE ST. CHICAGO IL	13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		14 NAME	
STREET ADDRESS		15 STREET ADDRESS	
CITY - ST - ZIP		16 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	17 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		18 NAME	
STREET ADDRESS		19 STREET ADDRESS	
CITY - ST - ZIP		20 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY - ST - ZIP		24 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: *Richard A. Leonard, Pres.* January 16, 1996 (919) 781-5611  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE #

CR2E034 (12/95)