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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

562838 **DOCUMENT #** 1. Corporation Name

(3)

J. DORSEY REAL ESTATE & APPRAISAL, INC. Mailing Address Principal Place of Business 2700 E. OAKLAND PARK BLVD. 2700 E. OAKLAND PARK BLVD.



Suite B Ft. Lauderdale FL 33306			SUITE B FT. LAUDERDALE FL 33306		Date Incorporated or Qualified	3a. Date of Last I	
					03/23/1978	03/14/19	95
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-1822172		Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	h		5. Certificate of Status Desired	1 1	5 Additional Required
City & State		City & State			6. Election Campaign Financing	\$5.0	00 May Be
3		28			Trust Fund Contribution	7	ed to Fees
Zip	Country	Zip	Co	untry	8. This corporation has liability for	intangible tax under	199.032,
4	25	29	30			□No	
	9. Name and Address of Curre	ent Registered Agent		T	10. Name and Address of New R	tegistered Agent	
				81 Name			
BRINKLEY, W. MICHAEL				82 Street Add	tress (P.O. Box Number is Not Acceptable)		
	ST OAKLAND PARK BOULEV/ NUDERDALE FL 33339	ARD	83				
FORT L	IODENDALL FE 00009			84 City		— 85 2	Zip Code
						FL "	
SIGNATURE	n, and accept the obligations of, Se signature, typed or printed name of regioned as			ed Agent's gnature requir	oration submits this statement for the pure and of directors. I hereby accept the app ed when renstating!	DATE	
12.		ND DIRECTORS	13		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECT	ORS IN 12
THILE	PD	DELFTE	1. 1	TILE		☐ Change	Addition
NAME	DORSEY, JOHN M.		1.2	NAME			
STREET ADDRESS	2700 E.OAKLAND PARK BI	LVD	1.3	STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE, FL 3330)6	1.4	CITY-ST-ZIP			
TILE		DELETE		TITLE		Change	Addition
NAMÉ			2.2	NAME			
STREET ADDRESS			23	STREET ADDRESS			
CITY-S1-ZIP			24	CITY-ST-ZIP			
TITLE		[] DELETE		1 TITLE		Chang	Addition
NAME			32	NAME			
STREET ADDRESS			3.3	STREET ADDRESS			
CITY-ST-ZIP			3.4	CITY-ST-ZIP			
TITLE		☐ DELETE		1 THTLE		Chang	Addition
NAME			4.2	NAME			
STREET ADDRESS			4.3	STHEFT ADDRESS			
CITY-S1-ZIP				CITY - ST - ZIP			
THILE		☐ DELETE		1 TITLE		Chang	e 🔲 Addition
NAME				NAME			
STREET ADDRESS				S STREET ADDRESS			
			1	CHY-ST-ZIP			
CITY-ST-ZIP TITLE		DELFTE		1 TITLE		☐ Chang	e 🔲 Addition
NAME		L		NAME			
				S STREET ADDRESS			
STREET ADDRESS				I .			
CITY-ST-ZIP	and that the information cumpling	ad with this files is valuaterily fu		d does not qualify	for the exemption stated in Section 119	0.07(3)(k). Elorida Sta	tutes I further

I do hereby certify that the information supplied with this firing 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 logal effect as if made under eath; that I am an officer or director of the conoration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brock 12 or Block 11 if changed in on an attachment with an address.

SIGNATURE:

John M. Dorsey, President John M. Dorse

4/26/96

305/566-3575

Dayt me Phone ≠