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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 587896 (2)

1. Corporation Name

PARDICK-SETTLE REAL ESTATE, INC.



Principal Place of Business

Mailing Address

1050 PALM BEACH ROAD  
STUART FL 34994

1050 PALM BEACH ROAD  
STUART FL 34994

3. Date Incorporated or Qualified

09/20/1978

3a. Date of Last Report

04/28/1995

2. Principal Place of Business

2a. Mailing Address

21 3070 S.W. Mapp Rd.

26 3070 S.W. Mapp Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite B

27 Suite B

City & State

City & State

23 Palm City, FL

28 Palm City, FL

Zip

Zip

Country

Country

24 34990

25 Martin

29 34990

30 Martin

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PARDIECK, JAMES J.  
1050 PALM BEACH ROAD  
STUART FL 34994

81 Name

Pardieck, James J.

82 Street Address (P.O. Box Number is Not Acceptable)

3070 S.W. Mapp Rd.

83

Suite B

84 City

Palm City

FL

85 Zip Code

34990

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME PARDIECK, JAMES J.

STREET ADDRESS 1050 PALM BEACH ROAD

CITY- ST- ZIP 97UART FL

TITLE S ☐ DELETE

NAME ~~PARDIECK, PATRICIA A.~~ *NAME crossed out in error*

STREET ADDRESS ~~1050 PALM BEACH ROAD~~

CITY- ST- ZIP ~~STUART FL~~

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PTD ☒ Change ☐ Addition

1.2 NAME Pardieck, James J.

1.3 STREET ADDRESS 3070 S.W. Mapp Rd., Suite B

1.4 CITY- ST- ZIP Palm City, FL 34990

2.1 TITLE S ☒ Change ☐ Addition

2.2 NAME Pardieck, Patricia A.

2.3 STREET ADDRESS 3070 S.W. Mapp Rd., Suite B

2.4 CITY- ST- ZIP Palm City, FL 34990

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 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:

*James J. Pardieck*

James J. Pardieck

4/12/96

407/283-5105

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)