2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2002 8:00 am
Secretary of State
05-08-2002 90096 006 ***158.75

DOCUMENT # 616872

1. Entity Name
CENTURY REALTY FUNDS, INC.

Principal Place of Business	Mailing Address
5015 SOUTH FLORIDA AVE. SUITE 200 LAKELAND FL 33813	P.O. BOX 5252 LAKELAND FL 33807

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
500 S. Florida Ave	
Suite, Apt. #, etc.: 700	Suite, Apt. #, etc.
City & State: Lakeland, FL	City & State
Zip: 33801 Country: USA	Zip / Country

4. FEI Number 59-1882315 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCFARLAND, PETER A. ESQ. PETER A. MEFARLANE, P.A. 5015 SOUTH FLORIDA AVE. #215 LAKELAND FL 33813	Name Street Address (P.O. Box Not Acceptable) 500 S. Florida Ave #715 City Lakeland FL Zip Code 33801

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAXWELL, LAWRENCE W. 5015 SOUTH FLORIDA AVE. #200 LAKELAND FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	500 S. Florida Avenue, #700 Lakeland, FL 33801
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BOCHIS, GEORGE J 5015 SOUTH FLORIDA AVE. #200 LAKELAND FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	500 S. Florida Avenue, #700 Lakeland, FL 33801
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT KELLEY, KIM 5015 SOUTH FLORIDA AVE. #200 LAKELAND FL 33813	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	500 S. Florida Avenue, #700 Lakeland, FL 33801
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MAXWELL, LAWRENCE T 5015 SOUTH FLORIDA AVENUE #200 LAKELAND FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	500 S. Florida Avenue, #700 Lakeland, FL 33801
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS EBDRUP, BRIDGET 5015 SOUTH FLORIDA AVE. #200 LAKELAND FL 33813	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	500 S. Florida Avenue, #700 Lakeland, FL 33801
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ☐ Change ☑ Addition Benjamin D. E Falk 500 S. Florida Ave #700 Lakeland FL 33801

CR2E034 (9/01)

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Benjamin D. E. Falk 4/30/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Benjamin D.E. Falk