FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
STATE

DOCUMENT # **653886** **(2)**

1. Corporation Name
FOUR STAR REALTY OF BREVARD, INC.

Principal Place of Business	Mailing Address
310 CHENEY HIGHWAY TITUSVILLE FL 32780	310 CHENEY HIGHWAY TITUSVILLE FL 32780

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/29/1980
3a. Date of Last Report: 01/24/1994

2. Principal Place of Business	2a. Mailing Address
21 416 Cheney Highway	26 416 Cheney Highway
Suite, Apt. #, etc. 22 —	Suite, Apt. #, etc. 27 —
City & State 23 TITUSVILLE, FLORIDA	City & State 28 TITUSVILLE, FLORIDA
Zip 24 32780 Country 25 USA	Zip 29 32780 Country 30 USA

4. FEI Number: 59-1979354 ☐ 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
BECK, TED M 4160 GROVEWOOD LANE TITUSVILLE, FL 32780	81 Name: PAMELA ANN SHAFFNER 82 Street Address (P.O. Box Number is Not Acceptable): 3480 TODD LANE 83 84 City: TITUSVILLE FL 85 Zip Code: 32754

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: Pamela Ann Shaffner — PAMELA ANN SHAFFNER — 5/10/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PDS	11 TITLE	PTSD	☒ Change ☐ Addition
NAME	BECK, TED M	12 NAME	PAMELA ANN SHAFFNER	
STREET ADDRESS	4160 GROVEWOOD LANE	13 STREET ADDRESS	3480 TODD LANE	
CITY ST ZIP	TITUSVILLE, FL 00000	14 CITY ST ZIP	MIMS, FL 32754	
TITLE	VDT	21 TITLE	VD	☒ Change ☐ Addition
NAME	BECK, ELIZABETH	22 NAME	SHAFFNER, Theodora L.	
STREET ADDRESS	4160 GROVEWOOD LANE	23 STREET ADDRESS	3480 TODD LANE	
CITY ST ZIP	TITUSVILLE FL	24 CITY ST ZIP	MIMS, FL. 32754	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I/We 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)(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 above, or on an attachment with an address.

SIGNATURE: Pamela Ann Shaffner — 5/12/95 — (407) 269-3000
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR (Date) (Daytime Phone #)

0045304 CP