PRO CORPOF ANNUAL 19:	RATION REPORT	FLORIDA DEPARTME Sandra B. Mo Secretary of DIVISION OF CORE	rtham State		
OCUMENT # 659255 (4)					
Corporation Name DANTIN REALTY CORPORATION				ALL	
DANTIN	REALTY CORPORATION				
rincipal Place of B	Business	Mailing Address		I (SELIE BILD) GIVE LOUIS AND A	
216 S PARK A	VE	216 S. PARK AVE." .P.O. BOX-1581→			
WINTER PARK-FL 92790- US		WINTER PARK FL 32790. US		3. Date incorporated or Qualified 03/06/1980 3a. Date of Last Report 10/05/1995	
		T. A.		4. FEI Number	Applied For
Principal Place	of Business DAVIS DRIVE	2a. Mailing Address 3 A M	1E S	13-9421346	Not Applicable \$8.75 Additional
Suite, Apt. #, 6		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State	10 72	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
3280	Country Zip Country		Country	8. This corporation has liability for intangle	ble tax under s=199.032, √o
Zip 4	25 9. Name and Address of Current	29 3	0	Florida Statutes Yes 10. Name and Address of New Registe	ered Agent
	PARK FL 32790 ORLAN		84 City	As this electronout for the Durronse	FL 85 Zip Code of changing its registered office
11. Pursuant to or registered familiar with,	the provisions of Sections 607,0502 d agent, or both, in the State of Floric , and accept the obligations of, Sect	and 607.1508, Florida Statutes, da Such change was authorized ion 607.0505, Florida Statutes.	the above-named corpo by the corporation's boa	ration submits this statement for the purpose rrd of directors. I hereby accept the appointm	ent as registered agent. I am
	ignature, typed or printed name of registered agort		Registered Agent signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFICEF	LIA'T
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OTT ISE.	Change Addition
TITLE	dp Dantin, Edwin G JR	DELETE	1. 1 TITLE 1.2 NAME		
NAME STREET ADDRESS	ANAN LAKE DAMO DRIVE		1.3 STREET ADDRESS		
CITY - ST - ZIP	ORLANDO FL 32806	FIRE	1.4 CITY-S1-ZIP		Cnange Addition
TITLE		DELETE	2 1 TITLE 2.2 NAME		
NAME			2 3 STREET ADDRESS		
			2.4 CITY - ST - ZIP		Change Addition
STREFT ADDRESS		DELETE	3 1 1/TLE		
CITY - ST - ZIP			3.2 NAME		
CITY - ST - ZIP TITLE			33 STREET ADDRESS		To State San
CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP					Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		□ DEFEIE	3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		Change Addition
CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME			3.3 STREET ADDRESS 3.4 CITY - ST - ZIF 4.1 TITLE		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME			3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE		
CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP		☐ DELETE	3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME		
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CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME NAME		☐ DELETE	3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITE 5.2 NAME 5.3 STREET ADDRESS		

14. Too 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 certify 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 changes, or on an attachment within address.

SIGNATURE:

SIGNATURE:

Description of the corporation of the corporation of the corporation of 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 changes, or on an attachment within address.

EDWIN G. JANTIN, JR. 4/34/46 (401)251-2737

Description of the corporation of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further that my name of the corporation of the cor

6.2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS