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

DOCUMENT # 671051

(1)

CENTURY 21, J.R. FARLEY REALTY CORPORATION

CENTU	INT 21, J.N. FANLET NEAL	IT CONFORMION					
Principal Place of Business Mailing Address					E 1861) A BITT 1866; TABLE GITOL TIBE SISTEM BERLY		
	Gress ave suite 4 Beach FL 33406	1771 S CONGRESS AVE SUITE 4 WEST PALM BEACH FL 33406					
					3. Date Incorporated or Qualified 05/23/1980	3a. Date of Last Report 05/01/1995	
2. Principal Pla	ace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-2003195	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28		Trust Fund Contribution	Added to rees		
Zip	├ ──		Country	ry 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☑ Yes ☐ No			
24	9. Name and Address of Currer	29 and Registered Agent	30]		10. Name and Address of New R		
			81	Name	15		
JORDAN, EMORY C., III			82	Street Add	idress (P.O. Box Number is Not Acceptable)		
	INTH AVENUE NORTH ORTH FL 33461		83				
001211	J		84			85 Zip Code	
			84	City	FL 85 Zip Code		
or register familiar wit SIGNATURE	ed agent, or both, in the State of Flor h, and accept the obligations of Sec Signature, tyred or printed name of registered species	ida Such change was author thon 607.0505, Florida Statuti	rized by the corp	oration's tipa	ration submits this statement for the pur ind of directors. Thereby accept the appo	bintment as régistered agent. Lam	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIFFCTORS IN 12	
TITLE	PST	DELETE 1 1				Change 🗀 Add tion	
NAME	BEATY, LEONARD H		1.2 NAME				
STREET ADDRESS	2542 HAVENWOOD RD		1 3 STREE	ADDRESS			
CITY-ST-ZIP	W?PALM BEACH FL		1.4 CITY - 1	ST-2/P		E2 65	
TITLE	DELET		2 1 TITLE			Change Addition	
NAME			2.2 NAME				
STREET ADDRESS			2 3 STREE				
CITY - ST - ZIP		DELETE	2 4 G•TY - ST - Z•F'			Change Addition	
NAME			3 2 NAME				
STREET ADDRESS				T ADDRESS			
CHTY-ST-ZIP			3.4 CITY -				
TITLE			4 1 TITLE	3 -21		Change Addition	
NAME			4.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CiTY-				
TITLE			5 1 TIFLE			Change Addition	
NAME			5.2 NAME			_	
STREET ADDRESS			5.3 \$1886	T ADDRESS			
CITY - SI - ZIP			5.4 CITY-				
TITLE			6 1 TITLE			Change Addition	

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

6 4 CHTY - ST - ZIP

6.2 NAME 6.3 STHEFT ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEDWARD H. BRAT

4/23/96 407 964 7721

Daytime Phone