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AND
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95 APR 27 PM 1:45

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1995

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



DOCUMENT # 820720 (1)

1. Corporation Name
REALTY RESOURCES CORPORATION

Principal Place of Business Mailing Address

**3701 SW 1/2 AVE
DAVIE FL 33330
US** **P O BOX 820716
SO FL FL 33082
US**

2. Principal Place of Business 2a. Mailing Address

21 25

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 27

City & State City & State

23 28

Zip Country Zip Country

24 25 29 30

3. Date Incorporated or Qualified 3a. Date of Last Report

09/11/1967 **05/01/1994**

4. FEI Number Applied For

59-1161662 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing \$5.00 May Be Added to Fees

Trust Fund Contribution

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**GARDNER, FRANK C
3200 SW 116 AVE
DAVIE FL 33330**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

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 registering) DATE

12. OFFICERS AND DIRECTORS

TITLE	ST
NAME	FITZGERALD, LUCETTE L.
STREET ADDRESS	541 SW 178 WAY
CITY - ST - ZIP	PEMBROKE PINES FL
TITLE	PD
NAME	GARDNER, FRANK C
STREET ADDRESS	3200 SW 116 AVE
CITY - ST - ZIP	DAVIE FL
TITLE	D
NAME	DRISCOLL, JOHN W
STREET ADDRESS	2100 FIRST NAT'L BK BLD
CITY - ST - ZIP	ST PAUL, MN 00000
TITLE	VD
NAME	GARDNER, FRANCES
STREET ADDRESS	3200 SW 116 AVE
CITY - ST - ZIP	DAVIE FL
TITLE	VP
NAME	GARDNER, PETER C.
STREET ADDRESS	3200 SW 116 AVE
CITY - ST - ZIP	DAVIE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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)(b), 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 any alteration with an attachment.

SIGNATURE: *Frank C Gardner* 4/24/95 305 473 9845

Signature typed or printed name of signing officer or director Title (Typed Name)