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

APPROVED AND FILED

1995 APR 26 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # **833834** **(5)**

1. Corporation Name

MILF REALTY CO.

Principal Place of Business	Mailing Address
C/O CT CORPORATION SYSTEM ~~8751 WEST BROWARD BOULEVARD~~ PLANTATION FL 33324	C/O CT CORPORATION SYSTEM ~~8751 WEST BROWARD BOULEVARD~~ PLANTATION FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **02/14/1975**
3a. Date of Last Report: **02/23/1994**

2. Principal Place of Business (21)
2a. Mailing Address (26): **1200 S. Pine Island Road**
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) County (25)
Zip (29) County (30)

4. FEI Number: **23-1624200** ☐ 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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 _____ Date
(Typed or printed name of registered agent and title if applicable) (Registered Agent's signature required when applicable)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	11 TITLE	☐ Change ☐ Addition
NAME	PENNINGTON, FRED A.	12 NAME	
STREET ADDRESS	755 21ST AVENUE SOUTH	13 STREET ADDRESS	
CITY ST ZIP	NAPLES FL	14 CITY ST ZIP	
TITLE	P	21 TITLE	☐ Change ☐ Addition
NAME	PENNINGTON, FRED A. JR.	22 NAME	
STREET ADDRESS	307 BELAIRE DRIVE	23 STREET ADDRESS	
CITY ST ZIP	SHIREMANSTOWN PA	24 CITY ST ZIP	
TITLE	S	31 TITLE	☐ Change ☐ Addition
NAME	MOYER, SHERRIL	32 NAME	
STREET ADDRESS	1641 CLARKS VALLY RD.	33 STREET ADDRESS	
CITY ST ZIP	DAUPHIN PA	34 CITY ST ZIP	
TITLE	T	41 TITLE	☐ Change ☐ Addition
NAME	BEKELJA, L. MICHAEL	42 NAME	
STREET ADDRESS	5901 CANYON ROAD	43 STREET ADDRESS	
CITY ST ZIP	HARRISBURG PA	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	

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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)(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 if changed, or on an attachment with an address.

SIGNATURE: L Michael Bekelja Treasurer 4/7/95
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER Title Date

0231004 CP