FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # F04459 (6)

1. Corporation Name

COMBINED CAPITAL REALTY SERVICES, INC.

Principal Place of Business	Mailing Address
333 S. TAMIAMI TRAIL STE. 201 VENICE FL 34285 US	333 S. TAMIAMI TRAIL STE. 201 VENICE FL 34285 US

2. Principal Place of Business		2a. Mailing Address	
21	2801 FRUITVILLE Rd	26	2801 FRUITVILLE Rd.
22 Suite, Apt. #, etc.	SUITE 135	27 Suite, Apt. #, etc.	SUITE 135
23 City & State	SARASOTA, FL	28 City & State	SARASOTA, FL
24 Zip	34237	29 Zip	34237
25 Country	USA	30 Country	USA

3. Date Incorporated or Qualified: 11/05/1980

3a. Date of Last Report: 03/02/1995

4. FEI Number: 59-2613019 ☐ 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

MOSELEY, PAUL
333 S. TAMIAMI TRAIL
STE. 201
VENICE FL 34285

10. Name and Address of New Registered Agent

81 Name: DONALD T. REGAN, JR.
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: DONALD T. REGAN, JR. [signature] DATE: 4-29-96

Signature, typed or printed name of new registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	☒ DELETE
NAME	MOSELEY, PAUL	
STREET ADDRESS	333 S. TAMIAMI TRAIL, STE. 201	
CITY-ST-ZIP	VENICE FL	
TITLE	DST	☐ DELETE
NAME	REGAN, DONALD T., JR.	
STREET ADDRESS	333 S. TAMIAMI TRAIL, STE. 201	
CITY-ST-ZIP	VENICE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	DPSTV	☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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.

SIGNATURE: [signature] — 4-29-96 — 941-484-7662

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #