

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY - 1 PM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F57803** (1)

1. Corporation Name
ROY DEESE REALTY, INC.

Principal Place of Business
**661 SOUTH 3RD STREET
JACKSONVILLE BEACH FL 32250**

Mailing Address
**681 SOUTH 3RD STREET
JACKSONVILLE BEACH FL 32250**

DO NOT WRITE IN THIS SPACE

3. Date first incorporated or qualified **12/09/1981** 3a. Date of last report **05/10/1994**

4. FEI Number **59-2144480** 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 failed for interrupt tax under the Florida Statutes Yes No

2. Principal Place of Business		2a. Mailing Address	
21	State, Apt # etc	26	State, Apt # etc
22	City & State	27	City & State
23	Zip	28	Zip
24	County	29	County
30		30	

9. Name and Address of Current Registered Agent

**SKEELS, ROBERT A
405 SOUTH THIRD STREET
JACKSONVILLE BEACH FL 32250**

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 607.0501 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 607.0508, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	DEESE, ROY H., SR
STREET ADDRESS	1720 LIGHTY LANE
CITY, STATE, ZIP	NEPTUNE BEACH FL
TITLE	D
NAME	DEESE, ROY H., SR
STREET ADDRESS	1720 LIGHTY LANE
CITY, STATE, ZIP	NEPTUNE BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, STATE, ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, STATE, ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, STATE, ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, STATE, ZIP	

14. I, the undersigned, certify that the information supplied with this form is accurately furnished and that I am qualified for the appointment stated in Section 607.0501, Florida Statutes. I further certify that the information made available on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if my signature were made. That I am an officer or director of the corporation or the removal of director empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this form and in Block 13 of this form with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROY H. DEESE

S-1-9.5 909-291-5060