

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F73654 (8)

1. Corporation Name

REALTY ADVISERS CORP.



Principal Place of Business

Mailing Address

1776 AMERICAN HERITAGE LIFE DR.
JACKSONVILLE FL 32224-6688
US

1776 AMERICAN HERITAGE LIFE DR.
JACKSONVILLE FL 32224-6688
US

3. Date Incorporated or Qualified

03/25/1982

3a. Date of Last Report

04/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

4. FEI Number

59-2626306

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

10. Name and Address of New Registered Agent

VERLANDER, CHRIS A.
1776 AMERICAN HERITAGE LIFE DR.
JACKSONVILLE FL 32224

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, if applicable

Signature typed or printed name of registered agent, if applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
VERLANDER, CHRIS A.
STREET ADDRESS
1776 AMERICAN HERITAGE LIFE DR.
CITY - ST - ZIP
JACKSONVILLE FL

TITLE ☐ DELETE

NAME
STD
MOREHEAD, C. RICHARD
STREET ADDRESS
1776 AMERICAN HERITAGE LIFE DR.
CITY - ST - ZIP
JACKSONVILLE FL

TITLE ☐ DELETE

NAME
CPD
O'NEAL, DOUGLAS T.
STREET ADDRESS
1776 AMERICAN HERITAGE LIFE DR.
CITY - ST - ZIP
JACKSONVILLE FL

TITLE ☐ DELETE

NAME
D
HEEKIN W. MICHAEL
STREET ADDRESS
1776 AMERICAN HERITAGE LIFE
CITY - ST - ZIP
JACKSONVILLE FL

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

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

800001798308
-04/29/96--01037--018
***200.00

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 addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(904) 992-1776

Day

Telephone #

CR2E034 (12/95)