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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR -8 PM 2:27

DOCUMENT # F94000004378 (5)

1. Corporation Name
DEVIN REALTY, INC.

Principal Place of Business	Mailing Address
12670 NEW BRITTANY BLVD., SUITE 103 FT. MYERS FL 33907	12670 NEW BRITTANY BLVD., SUITE 103 FT. MYERS FL 33907

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/23/1994
3a. Date of Last Report:

2. Principal Place of Business (21):
2a. Mailing Address (26):
Suite, Apt. #, etc. (22):
Suite, Apt. #, etc. (27):
City & State (23):
City & State (28):
Zip (24): Country (25):
Zip (29): Country (30):

4. FEI Number: 84-0810043 ☐ 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

BEAUREGARD, RODNEY D
8695 COLLEGE PKY.
SUITE 335
FT. MYERS FL 33919

10. Name and Address of New Registered Agent

81 Name: Beauregard, Rodney D
82 Street Address (P.O. Box Number is Not Acceptable): 12670 New Brittany Blvd.
83: Suite #103
84 City: Fort Myers FL 85 Zip Code: 33907

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE		☐ Change ☐ Addition
NAME	BEAUREGARD, RODNEY D	1.2 NAME		
STREET ADDRESS	2995 WILDERNESS PL., #102	1.3 STREET ADDRESS		
CITY-ST-ZIP	BOULDER CO 80301	1.4 CITY-ST-ZIP		
TITLE	EVD	2.1 TITLE		☐ Change ☐ Addition
NAME	PASSARELLI, JEFFREY N	2.2 NAME		
STREET ADDRESS	2995 WILDERNESS PL., #102	2.3 STREET ADDRESS		
CITY-ST-ZIP	BOULDER CO 80301	2.4 CITY-ST-ZIP		
TITLE	ASAT	3.1 TITLE	AV	☒ Change ☐ Addition
NAME	PAGET, DEBRA L	3.2 NAME	Britton, Richard	
STREET ADDRESS	2995 WILDERNESS PL.	3.3 STREET ADDRESS	385 North Main Street Suite D	
CITY-ST-ZIP	BOULDER CO 80301	3.4 CITY-ST-ZIP	Longmont, CO 80501	
TITLE	STD	4.1 TITLE	ST	☒ Change ☐ Addition
NAME	SPRAGUE, SUSAN L	4.2 NAME	Oldroyd, Rose M	
STREET ADDRESS	12670 NEW BRITTANY BLVD., #103	4.3 STREET ADDRESS	12670 New Brittany Blvd. #103	
CITY-ST-ZIP	FT. MYERS FL 33907	4.4 CITY-ST-ZIP	Ft. Myers, Fl. 33907	
TITLE	VD	5.1 TITLE		☐ Change ☐ Addition
NAME	GURULE, BARRY	5.2 NAME		
STREET ADDRESS	2995 WILDERNESS PL #102	5.3 STREET ADDRESS		
CITY-ST-ZIP	BOULDER CO 80301	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 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)(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 attached sheet, with an address.

SIGNATURE: Rodney D Beauregard 3-3-95 Date 813 936-6868 Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR

0021701 CP