


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F94000004967 (5)					
1. Corporation Name RICHMOND REALTY CORPORATION					
Principal Place of Business 1415 FOULK RD FOULKSTONE PLAZA, SUITE 200 WILMINGTON DE 19803			Mailing Address 1415 FOULK RD FOULKSTONE PLAZA, SUITE 200 WILMINGTON DE 19803-2727		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/26/1994	
21		26		3a. Date of Last Report 05/01/1996	
Suite, Apt. #, etc. Suite 205		Suite, Apt. #, etc. Suite 205		4. FEI Number 51-0306826	
City & State		City & State		Applied For Not Applicable	
23		28		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE <input type="checkbox"/> DELETE					
1.2 NAME <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
1.3 STREET ADDRESS Suite 205					
1.4 CITY-ST-ZIP					
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
3.2 NAME					
3.3 STREET ADDRESS Suite 205					
3.4 CITY-ST-ZIP					
4.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
4.2 NAME CEO Robert Rothman					
4.3 STREET ADDRESS 16057 Tampa Blvd. W., Box 198					
4.4 CITY-ST-ZIP Tampa, FL 33647					
5.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
5.2 NAME Shaker A. Youssef					
5.3 STREET ADDRESS 1415 Foulk Rd., Suite 205					
5.4 CITY-ST-ZIP Wilmington, DE 19803					
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					
14. I do hereby certify that the information supplied with this filing 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: Sandra Voss REQUIRED					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date 4/21/97 Daytime Phone # (302) 477-5900					

CR2E034 (9/96)