

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 # **F98314 (0)**

1. Corporation Name
REALTY MANAGEMENT GROUP, INC.



Principal Place of Business: **% MARK A WERNER 9250 CYPRESS GREEN DRIVE, SUITE 104 JACKSONVILLE FL 32256**
Mailing Address: **% MARK A WERNER 9250 CYPRESS GREEN DRIVE, SUITE 104 JACKSONVILLE FL 32256**

3. Date Incorporated or Qualified: **09/01/1982**
3a. Date of Last Report: **03/03/1995**

2. Principal Place of Business: **21 8917 Western Way**
Suite, Apt. #, etc: **22 7**
City & State: **23 Jacksonville, FL**
Zip: **24 32256** Country: **25 Duval**
2a. Mailing Address: **26 8917 Western Way**
Suite, Apt. #, etc.: **27 7**
City & State: **28 Jacksonville, FL**
Zip: **29 32256** Country: **30 Duval**

4. FFI Number: **59-2207198**
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: **WERNER, MARK A. 9250 CYPRESS GREEN DRIVE, SUITE 104 JACKSONVILLE FL 32256**
10. Name and Address of New Registered Agent:
81 Name: _____
82 Street Address (P.O. Box Number is Not Acceptable): _____
83 _____
84 City: _____ 85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0607 and 607.1505, 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 607.0506, Florida Statutes.

SIGNATURE: _____ Signature typed or printed in block, by all signers, in the appropriate space. (2001 Registered Agent Signature required when re-registering.) Date: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92	
TITLE	PDS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WERNER, MARK A	1.2 NAME	
STREET ADDRESS	4476 KINCARDINE DR.	1.3 STREET ADDRESS	1819 S. Ocean Drive
CITY- ST- ZIP	JACKSONVILLE, FL 00000	1.4 CITY- ST- ZIP	Jacksonville, FL 32250
TITLE	V	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WERNER, MARK A.	2.2 NAME	
STREET ADDRESS	9250 CYPRESS GREEN DR104	2.3 STREET ADDRESS	1819 S. Ocean Drive
CITY- ST- ZIP	JACKSONVILLE, FL 00000	2.4 CITY- ST- ZIP	Jacksonville, FL 32250
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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)(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: *Mark A Werner* President **2/7/96** **363 2002**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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