

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

APPROVED
AND
FILED

95 MAY -1 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G25263** (6)

1. Corporation Name

EAST PARK REALTY, INC.

Principal Place of Business

**3300 PHILLIPS HIGHWAY
JACKSONVILLE FL 32207
US**

Mailing Address

**POST OFFICE BOX 5369
JACKSONVILLE FL 32247-5369
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/23/1983

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-2298934

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

**MCGEEHEE, THOMAS R.
3300 PHILLIPS HWY
JACKSONVILLE FL 32207**

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VD
NAME	MCGEEHEE, FRANK S.
STREET ADDRESS	3300 PHILLIPS HWY
CITY - ST - ZIP	JACKSONVILLE FL
TITLE	CPD
NAME	MCGEEHEE, THOMAS R.
STREET ADDRESS	3300 PHILLIPS HWY
CITY - ST - ZIP	JACKSONVILLE FL
TITLE	AST
NAME	DUPREE, J.W., JR.
STREET ADDRESS	3300 PHILLIPS HWY
CITY - ST - ZIP	JACKSONVILLE FL
TITLE	VAS
NAME	PATTERSON, R. A.
STREET ADDRESS	3300 PHILLIPS HWY
CITY - ST - ZIP	JACKSONVILLE FL
TITLE	S
NAME	MCGEEHEE, TR JR
STREET ADDRESS	3300 PHILLIPS HWY
CITY - ST - ZIP	JACKSONVILLE FL
TITLE	V
NAME	MCGEEHEE, F S JR
STREET ADDRESS	3300 PHILLIPS HWY
CITY - ST - ZIP	JACKSONVILLE FL

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	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	Assistant Treasurer
4.3 STREET ADDRESS	Jonathan Y. Rogers
4.4 CITY - ST - ZIP	3300 Phillips Hwy Jacksonville, FL. 32207
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

F. Sutton McGehee, Jr.

4/28/95 (904) 348-3300
Date Daytime Phone #