

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 APR 18 PM 10:05

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # G27228

(7)

1. Corporation Name

HALE REALTY, INC.

Principal Place of Business

**9120 SW 46 BLVD.
GAINESVILLE FL 32608**

Mailing Address

**9120 SW 46 BLVD.
GAINESVILLE FL 32608**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/10/1983

3a. Date of Last Report

03/17/1994

2. Principal Place of Business

21 5300 SW 91 TERR.

2a. Mailing Address

26 5300 SW 91 TERR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 GAINESVILLE FL

28

Zip

Country

Zip

Country

24 32608-7124

25

29 32608-7124

30

4. FEI Number

59-2270369

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

**KRAMER, ROBERT
9120 SW 46 BLVD.
GAINESVILLE FL 32608**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

5300 SW 91 TERR.

83

84 City

FL

85 Zip Code

32608-7124

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	P
NAME	KRAMER, ROBERT
STREET ADDRESS	9120 SW 46 BLVD
CITY - ST - ZIP	GAINESVILLE, FL 32608
TITLE	V
NAME	COOPER, J CLEVELAND III
STREET ADDRESS	9120 SW 46 BLVD
CITY - ST - ZIP	GAINESVILLE, FL 32608
TITLE	V
NAME	KASKEL, MATTHEW
STREET ADDRESS	10295 SW 248 ST.
CITY - ST - ZIP	MIAMI FL 33032
TITLE	ST
NAME	DOLSAK, CHARLES
STREET ADDRESS	9120 SW 46 BLVD
CITY - ST - ZIP	GAINESVILLE, FL 32608
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
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	5300 SW 91 TERR.
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	5300 SW 91 TERR
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	
4.3 STREET ADDRESS	5300 SW 91 TERR
4.4 CITY - ST - ZIP	
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 110.07(3)(b), Florida Statutes. I further certify that the information included in 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

ROBERT B. KRAMER

Date

4-13-95

Daytime Phone

336-9445

0004700 CP