

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

95 JAN 19 AM 9:58

**DOCUMENT # G31164 (8)**

1. Corporation Name

**GORDON REAL ESTATE SERVICES, INC.**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business  
**C/O IRWIN B. GORDON  
1739 LITTLEPOINTE CIR.  
SARASOTA FL 34231**

Mailing Address  
**C/O THELMA GORDON  
1739 LITTLE POINTE CIRCLE  
SARASOTA FL 34231  
US**

3. Date Incorporated or Qualified  
**03/30/1983**

3a. Date of Last Report  
**01/28/1994**

4. FEI Number  
**59-2296124**

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

2. Principal Place of Business  
**21**

2a. Mailing Address  
**26**

State, Apt. #, etc.  
**22**

City & State  
**23**

Zip  
**24**

Country  
**25**

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent  
**GORDON, THELMA  
1739 LITTLEPOINTE CIR.  
SARASOTA FL 34231**

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 \_\_\_\_\_  
(NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

| TITLE | NAME           | STREET ADDRESS     | CITY - ST - ZIP    |
|-------|----------------|--------------------|--------------------|
| PTS   | GORDON, THELMA | 1739 LITTLEPNT CIR | SARASOTA, FL 00000 |
| D     | GORDON, THELMA | 1739 LITTLEPNT CIR | SARASOTA, FL 00000 |
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|       |                |                    |                    |
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY - ST - ZIP |
|-----------|----------|--------------------|---------------------|
|           |          |                    |                     |
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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 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: Thelma Gordon 1-11-95 (813)-922-7222  
THELMA GORDON, PRES.