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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandia B. Martham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **G40636** (4)

1. Corporation Name

**D. ROSS REALTY, INC.**



Principal Place of Business

**12 BRIDGET TERR.  
ORMOND BCH. FL 32174**

Mailing Address

**12 BRIDGET TERR.  
ORMOND BCH. FL 32174**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

Country

29

Zip

30

9. Name and Address of Current Registered Agent

**DANIELS, DOUGLAS A.  
149-F SOUTH RIDGEWOOD AVE.  
#120  
DAYTONA BEACH FL 32114**

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0503, Florida Statutes, I, the undersigned, hereby certify that I am duly qualified to act as the registered agent 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 of person making registration or change of registered office or agent

Signature of person making registration or change of registered office or agent

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **PST**  
STREET ADDRESS **ROSS, DOUGLAS R**  
CITY-ST-ZIP **12 BRIDGET TERR.  
ORMOND BCH, FL 00000**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
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CITY-ST-ZIP

TITLE ☐ DELETE  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 NAME ☐ 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

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 119.07(1)(a), 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 it made under oath, that I am an officer or director of the corporation or the officer or business representative of the corporation as reported and required by Chapter 607, Florida Statutes, and that my name appears in Book 12 or Book 13 of the current or previous annual report or address.

SIGNATURE:

SIGNATURE AND PRINTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/96

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