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

PROFIT CORPORATION ANNUAL REPORT



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

1996
DOCUMENT #
1. Corporation Name

G60975

(1)

EQUITY REALTY OF SOUTH FLORIDA, INC.

Principal Place of Business 5967 SE FEDERAL HWY. STUART FL 34997 Mailing Address

5967 SE FEDERAL HWY. STUART FL 34997 FILED Apr 16 1996 8:00 am Secretary of State



								3. Date Incorporated or Qualified				
2. Principal Pla	ce of Busine	SS	2a. Mailing Address	2a, Mailing Address				4. FEI Number	- L	17	Applied For	
21			26	26				59-2480376		ı İ	Not Applicable	
	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional	
22			27	27				5. Certificate of Status Desired		Fee f	Required	
City & State			City & State	City & State				6. Election Campaign Financing		\$5.0	0 May Be	
23			28	28				Trust Fund Contribution			d to Fees	
Zip	Country Zip Co			intry			8. This corporation has liability for	ntangible ta	x under s	199.032,		
24	25 29 30				Florida Statutes							
Name and Address of Current Registered Agent								10. Name and Address of New R	egistered /	Agent		
					81	Name						
FRANKLIN, GREGORY 5967 SE FEDERAL HWY						82 Street Address (P.O. Box Number is Not Acceptable)						
						OZ Siree: Address (F.O. DOX Humber is Not Acceptable)						
			83									
STUART FL 34997												
					84	City			FL	85 Zı	o 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 o	r printed name of registered age		(NO1E: Registered	i Agen	it signature rec	quired w		DATE	D.D.E.O.E.O.	DO 11.10	
12.		OFFICERS A	ND DIRECTORS	13.				ADDITIONS/CHANGES TO OFF				
TITLE	D		☐ DELETE	1.11	TLE				L	Change	Addition	
NAME		IN, DAVID		1.2 N								
STREET ADDRESS	3743 SV	V BRASSIE WAY		1.3 S		TREET ADDRESS						
CITY - S1 - ZIP		ITY FL 34990		1.4 C	ITY-S	T-ZIP	,					
TITLE	PST		DELETE	2 1 1	HTLE				[] Change	☐ Addition	
NAME		IN, GREGORY		221		2 NAME						
STREET ADDRESS		Harrison Strei	1	235		2 3 STREET ADDRESS						
CITY-ST-ZIP	STUART	FL 34997		241		2 4 CITY - ST - ZIP						
TITLE			DELETE	ETE 311		TITLE				Change	☐ Addition	
NAME				3.2 NAME								
STREET ADDRESS				3 3. S								
CITY-ST-ZIP				3 4 C	ITY-S	IT-ZIP						
TITLE			☐ DELETE	4.11					[Change	Addition	
NAME				4.2 N	AME							
STREET ADDRESS				4.3 \$	TREET	ADDRESS					1	
CITY-ST-ZIP						T-ZIP						
TITLE	□ DELETE				5 1 TITLE				[Change	☐ Addition	
NAME			-	5.2 N	AMÉ	1			-			
STREET ADDRESS				1		ADDRESS						
					5.4 CITY - ST - ZIP							
CITY-ST-ZIP TITLE					6 1 TiTLE					Change	Addition	
NAME				621		1			•	_ •	_	
						ADDRESS						
STREET ADDRESS												
CHY-SI-ZIP	v certify that	the information supplie	d with this filing is voluntarily			ST-ZIP is not qual	lify for	the exemption stated in Section 119	.07(3)(k), Flo	rida Statu	tes. I further	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k), Florida Statutes. I furner 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 carth, 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 12 mg/changed, or on an attackment with an address.

SIGNATURE:

TURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/96 (407) 88-205