

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 14 PM 2:32

DOCUMENT # **H32485** (5)

1. Corporation Name
SOUTHEAST REAL ESTATE RESOURCES, INC.

Principal Place of Business Mailing Address
100 RIALTO PLACE, STE 500 MELBOURNE FL 32901

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **12/04/1984** 3a. Date of Last Report **04/19/1994**

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. 29. 30.

4. FEI Number **59-3214606** 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

10. Name and Address of New Registered Agent

**WHERRY, STEPHEN R
100 RIALTO PLACE, SUITE 500
MELBOURNE FL 32901**

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 (print or printed name of registered agent and filer applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **SOTTILE, JAMES**
STREET ADDRESS **2525 INDIAN MOUND TRAIL**
CITY - ST - ZIP **CORAL GABLES FL**

1. 1 TITLE Change Addition
1. 2 NAME
1. 3 STREET ADDRESS
1. 4 CITY - ST - ZIP

TITLE **PD**
NAME **SOTTILE, JOHN H.**
STREET ADDRESS **2324 BROOKSIDE WAY**
CITY - ST - ZIP **INDIALANTIC FL**

2. 1 TITLE Change Addition
2. 2 NAME
2. 3 STREET ADDRESS
2. 4 CITY - ST - ZIP

TITLE **SD**
NAME **LEITNER, MARY H.**
STREET ADDRESS **2344 BROOKSIDE DR.**
CITY - ST - ZIP **INDIALANTIC FL**

3. 1 TITLE Change Addition
3. 2 NAME
3. 3 STREET ADDRESS
3. 4 CITY - ST - ZIP

TITLE **T**
NAME **WHERRY, STEPHEN R.**
STREET ADDRESS **1217 ELCON DRIVE**
CITY - ST - ZIP **MELBOURNE FL**

4. 1 TITLE Change Addition
4. 2 NAME
4. 3 STREET ADDRESS
4. 4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5. 1 TITLE Change Addition
5. 2 NAME
5. 3 STREET ADDRESS
5. 4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
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 in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1 (10.07)(9)(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, 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: By: *Stephen R. Wherry* **Stephen R. Wherry, Treasurer** 1/26/95 407-724-1700
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR