

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

*CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

03 MAY -1 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H49510** (1)

To: Corporation Name

CUMBERLAND REAL ESTATE HOLDINGS, INC.

Principal Place of Business

Mailing Address

**4311 W WATERS AVE
STE 402
TAMPA FL 33614**

**4311 W WATERS AVE
STE 402
TAMPA FL 33614**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/28/1985

3a. Date of Last Report

03/28/1994

4. FET Number

59-2714542

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 § 193.042,
Florida Statutes.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

State Apt # etc.

State Apt # etc.

22

27

City & State

City & State

23

28

City

Country

City

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WILLIAMS, JOSEPH M
4311 W WATERS AVE STE 402
TAMPA FL 33614**

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 607.0103 and 607.1506, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or New Registered Agent)

(Signature of Registered Agent or New Registered Agent)

(Signature of Registered Agent or New Registered Agent)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. NAME

**PD
WILLIAMS, JOSEPH M
1501 SECOND AVENUE
TAMPA FL**

15. TITLE

☐ Change ☐ Addition

16. STREET ADDRESS

17. NAME

18. CITY & STATE

19. STREET ADDRESS

20. CITY & STATE

21. CITY & STATE

22. NAME

**V
WILLIAMS, JOSEPH M.
1501 SECOND AVENUE
TAMPA FL**

23. NAME

☐ Change ☐ Addition

24. STREET ADDRESS

25. STREET ADDRESS

26. CITY & STATE

27. CITY & STATE

28. NAME

**ST
HINDMAN, JOHN R.
1501 SECOND AVENUE
TAMPA FL**

29. NAME

☐ Change ☐ Addition

30. STREET ADDRESS

31. STREET ADDRESS

32. CITY & STATE

33. CITY & STATE

34. NAME

**ST
HINDMAN, JOHN R.
1501 SECOND AVENUE
TAMPA FL**

35. NAME

☐ Change ☐ Addition

36. STREET ADDRESS

37. STREET ADDRESS

38. CITY & STATE

39. CITY & STATE

40. NAME

**ST
HINDMAN, JOHN R.
1501 SECOND AVENUE
TAMPA FL**

41. NAME

☐ Change ☐ Addition

42. STREET ADDRESS

43. STREET ADDRESS

44. CITY & STATE

45. CITY & STATE

46. NAME

**ST
HINDMAN, JOHN R.
1501 SECOND AVENUE
TAMPA FL**

47. NAME

☐ Change ☐ Addition

48. STREET ADDRESS

49. STREET ADDRESS

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51. CITY & STATE

52. NAME

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63. CITY & STATE

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75. CITY & STATE

76. NAME

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77. NAME

☐ Change ☐ Addition

78. STREET ADDRESS

79. STREET ADDRESS

80. CITY & STATE

81. CITY & STATE

SIGNATURE:

INITIALS AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR