FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # H54742

(2)

TRUSA REALTY, INC. Principal Place of Business Mailing Address 1151 AZALEA GARDEN ROAD 1151 AZALEA GARDEN ROAD STE 353 STE 353 NORFOLK VA 23502-5601 NORFOLD VA 23502 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1985 05/01/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-2523838 26 Not Applicable 21 Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 none 27 none City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 105 83 TALLAHASSEE FL 32301 84 City Zip Code 11. Fursuant 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, typical or protect name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition 1) ft F 1.1 70TUE TOWNSEND. ALBERT W. NAMI 1.2 NAME 455 FAIRWAY DRIVE STREET ADDRESS 1.3 STREET ADDRESS DEERFIELD BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE VS Change Addition 2.1 TITLE TITLE FINK, RUSSELL A. NAME 2.2 NAME 1151 AZALEA GARDEN ROAD STREET ADDRESS 2.3 STREET ADDRESS NORFOLD VA CITY - ST - ZIP 2 4 CITY-ST-ZIP DELETE Addition Change AS THILE 3.1 TITLE BAWTINHIMER, SUSAN N 3.2 NAME 1151 AZALEA GARDEN RD. 3.3 STREET ADDRESS STREET ADDRESS NORFOLK VA 3.4. CHY-ST-ZIP CITY - ST - ZIP DELETE Change Addition THLE 4.1 DITE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADORESS

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 13 if changed or on an attachment with an address. or on an attachment with an address.

4.4 CITY-ST-ZiP

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

54 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DELETE

CITY - \$1 - 2IF

STREET ADDRESS

STREET ADDRESS

City-St-ZiP

CITY-S1-ZIF

THILE

TITLE

OR PRINTED NAME OF BIONING OFFICER OR DIRECTO

4-10-97

FILED

Apr 28 1997 8:00am

Secretary of State

757-858-6523

Change

Change

Addition

☐ Addition