

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Secretary of State
TALLAHASSEE, FLORIDA
CORPORATION REPORTS

APPROVED
AND
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05 MAY - 1 PM 10:18

DOCUMENT # J01577

(2)

MOORE REALTY, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Filing Date: 05 MAY - 1

File No.: 8-1-1000

C/O MOORE, MARTHA JEAN
1000 CLEARWATER-LARGO ROAD
LARGO FL 34640
US

% MARTHA JEAN MOORE
6 BELLEVUE BLVD. #708
BELLEAIR FL 34616

2. Name and Address of Corporation:

21. **21. Date of Incorporation:**

22. **22. Date of Last Report:**

23. **23. Date of Last Audit:**

24. **24. Date of Last Financial Statement:**

9. Name and Address of Current Registered Agent:

MOORE, MARTHA JEAN
6 BELLEVUE BLVD. #708
BELLEAIR FL 34616

11. The corporation, being incorporated under the laws of the state of Florida, hereby certifies that the information provided herein is true, accurate and complete to the best of my knowledge and belief. I am the registered agent for the corporation and I have authority to bind the corporation by my signature. I hereby accept the appointment as registered agent and agree to accept service of process on me at the address listed above. I understand that if I fail to do so, I will be liable for the costs of service of process.

12. Officers:

P
NAME: MOORE, MARTHA JEAN
6 BELLEVUE BLVD. #708
BELLEAIR FL

TS
NAME: MOORE, WALTER E.
6 BELLEVUE BLVD. #708
BELLEAIR FL

V
NAME: MOORE, MARTHA J.
6 BELLEVUE BLVD. #708
BELLEAIR FL

NAME:
NAME:
NAME:
NAME:

NAME:
NAME:
NAME:
NAME:

14. I declare under penalty of perjury that the information supplied with this filing is true, accurate and complete to the best of my knowledge and belief. I further certify that the information contained in the annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as a corporate officer or director of the corporation or the officer or director whom I represent to receive the report as required by Chapter 409, Florida Statutes, and that my name appears in block letters on the back of this form and affixed to it with an address.

SIGNATURE:

Martha Jean Moore 5-5-95 813/565-5722
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR