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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

J05633

(9)

DAWSON REALTY, INC.



Principal Place o	of Business	Mailing Address							41411 1841
% WILLIAM I	ANGE AVE	4964 S. ORANGE A	% WILLIAM L. DAWSON 4964 S. ORANGE AVE ORLANDO FL 32806						
ORLANDO F	L 32806	UHLANDU FL 32800				03/24/1986 05/			f Last Report /01/1995
2. Principal Pla	ce of Business	2a. Maring Address				4. FEI Number 59-2662635			Applied For Not Applicable
21 Suite, Apt. #	Lete	Suite, Apt #, etc						\$8.7	5 Additional
22	, etc.	27				5. Certificate of Status Desired			Required
City & State		City & State	City & State			6. Election Campaign Financing)0 May Be
23		28				Trust Fund Contribution			ed to Fees
Zφ	Country	Zφ	Cour	ntry		This corporation has liability for Florida Statutes Yes	intangible t ☐ No	ax under s	199.032,
24	9. Name and Address of Curren	29 Agent	[30]T			10. Name and Address of New F		Agent	
	g. Name and Address of Conten	tregistered Agent		81	Name	10.			
DAWEC	ON, WILLIAM L.		-	82		(D.O. Boy Niverhor in Not Accords)	No.		
	. ORANGE AVE		8			ddress (P.O. Box Number is Not Acceptable)			
	DO FL 32806			83					
Olasai	50 12 02000		-	84	Orty			85	(ip Code
				-		ration submits this statement for the pu	F۱	-	•
SIGNATURE _	Signative typed or protect carry of register. Logical OFFICERS ANS	DIRECTORS	kille Registerer: 13.	A, p, ril	t Saghiathaire Teografie	which femal they ADDITIONS/CHANGES TO OFF			ORS IN 12
TI'LE	PD	☐ DELETE	1.13	[†] LE				Change	☐ Addition
NAME	DAWSON, WILLIAM L		1.2 NA	ME					
STREET ADDRESS	4964 S. ORANGE AVE				ADDRESS				
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NAME					ADDRESS				
SLADDRESS STY-ST-ZP			240		Ì				
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TITLE		DELE 1E.	6 1 T					☐ Chang	Addition
NAME			6 2 N	AME					
STREET ADDRESS			638	TREFI	ADDRESS.				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. 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 12 or Block 13 if changing, or or architection with an address.

SIGNATURE: ω

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR William L. Dawson