

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

**APPROVED  
AND  
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**95 JUN 14 PM 12:23**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**DOCUMENT # J22293 (1)**

**1. Corporation Name  
USA TODAY REALTY, INC.**

**300001515743  
-06/16/95--01083--017  
\*\*\*\*225.00 \*\*\*\*225.00**

DO NOT WRITE IN THIS SPACE

**Principal Place of Business Mailing Address  
6400 N ANDREWS AVE  
PARK PLAZA STE 200  
FT. LAUDERDALE FL 33309  
US**

**3. Date Incorporated or Qualified 06/27/1986  
3a. Date of Last Report 05/01/1994**

**2. Principal Place of Business 2a. Mailing Address**  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 24 Country 25 29 30

**4. FEI Number 59-2695835 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  
MULLER, ALICE B.  
7750 NE 8TH CT.  
BOCA RATON FL 33487**

**10. Name and Address of New Registered Agent**  
81 Name **Richard C. Booth**  
82 Street Address (P.O. Box Number is Not Acceptable) **1502 Proctor Street**  
83  
84 City **Tallahassee** FL 85 Zip Code **32303**

**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** \_\_\_\_\_ **DATE** **6/12/95**  
(Signature, typed or printed name of filer, if not applicable) (NOTE: Registered Agent signature required when registering)

**12. OFFICERS AND DIRECTORS**

<b>TITLE</b>	<b>PD</b>
<b>NAME</b>	<b>MULLER, ALICE</b>
<b>STREET ADDRESS</b>	<b>5929 N OCEAN BLVD</b>
<b>CITY - ST - ZIP</b>	<b>OCEAN RIDGE FL</b>
<b>TITLE</b>	<b>S</b>
<b>NAME</b>	<b>STEWART, HENRY</b>
<b>STREET ADDRESS</b>	<b>224 COMMERCIAL BLVD.</b>
<b>CITY - ST - ZIP</b>	<b>LAUD BY THE SEA FL</b>
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

<b>11 TITLE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>12 NAME</b>	
<b>13 STREET ADDRESS</b>	<b>6400 N Andrews Ave #200</b>
<b>14 CITY - ST - ZIP</b>	<b>FT. LAUDERDALE, FL 33309</b>
<b>21 TITLE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>22 NAME</b>	<b>RALPH P MULLER</b>
<b>23 STREET ADDRESS</b>	<b>6400 N. ANDREWS AVE, #200</b>
<b>24 CITY - ST - ZIP</b>	<b>Fort Lauderdale FL 33309</b>
<b>31 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>32 NAME</b>	
<b>33 STREET ADDRESS</b>	
<b>34 CITY - ST - ZIP</b>	
<b>41 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>42 NAME</b>	
<b>43 STREET ADDRESS</b>	
<b>44 CITY - ST - ZIP</b>	
<b>51 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>52 NAME</b>	
<b>53 STREET ADDRESS</b>	
<b>54 CITY - ST - ZIP</b>	
<b>61 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>62 NAME</b>	
<b>63 STREET ADDRESS</b>	
<b>64 CITY - ST - ZIP</b>	

**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 110.07(3)(k), 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.**

**SIGNATURE:** \_\_\_\_\_ **DATE** **6/8/95** **305-351-8500**  
(Signature, typed or printed name of signing officer or director)