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CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # J23456 (3)

1. Corporation Name

CROSSLAND REALTY GROUP, INC.

95 MAY 24 PM 12:47

Principal Place of Business

Mailing Address

2821 CONWAY GARDENS RD
ORLANDO FL 32806
US

P O BOX 533072
ORLANDO FL 32853-3072
US

} o/c!

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/10/1986

3a. Date of Last Report

04/25/1994

2. Principal Place of Business

2a. Mailing Address

21 519 E. Livingston St.

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Orlando, Florida

27 Suite, Apt. #, etc.

City & State

City & State

23 US

28 City & State

Zip

Country

24 32803

Country

25 Orange

Country

26 32803

Country

27 32803

Country

28 32803

Country

29 32803

Country

30 32803

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SANDOR, JEAN R.
2821 CONWAY GARDENS RD
ORLANDO FL 32806

81 Name

SANDOR, Jean R.

82 Street Address (P.O. Box Number is Not Acceptable)

519 E. LIVINGSTON ST.

83

84 City

Orlando

FL

85 Zip Code

32803

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

Jean R. Sandor

JEAN R. SANDOR

5/19/95

12. OFFICERS AND DIRECTORS

TITLE DP

NAME SANDOR, JEAN R.

STREET ADDRESS 2821 CONWAY GARDENS RD

CITY - ST - ZIP ORLANDO FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President / SECRETARY ☒ Change ☐ Addition

1.2 NAME SANDOR, JEAN R.

1.3 STREET ADDRESS 519 E. LIVINGSTON ST

1.4 CITY - ST - ZIP Orlando FL. 32803

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Jean R. Sandor

5/19/95

(407) 381-3881