

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 1:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J34546 (8)

1. Corporate Name

247 LONGWOOD INVESTORS, INCORPORATED

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**861 W MORSE BLVD. (WINTER PARK, FL 32789)
SUITE 250
MAITLAND FL 32794-0658
US**

3. Date Incorporated or Qualified **09/19/1986** 3a. Date of Last Report **07/05/1994**

4. FEI Number **59-2728864** 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**

7. This corporation has liability for intangible tax under § 195.005, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. # etc. 26. Suite, Apt. # etc.

22. City & State 27. City & State

23. Zip 28. Zip

24. County 25. County 29. County 30. County

9. Name and Address of Current Registered Agent

**BROWN ESQ., DON L.
200 N. THORNTON AVE
ORLANDO FL 32803**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0605 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent of 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 607.0605, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Director) (Signature of Registered Agent or Director)

12. OFFICERS AND DIRECTORS

12.1	NAME	PD
12.2	NAME	MOGUL KING, TRACY
12.3	STREET ADDRESS	861 WEST MORSE BLVD.
12.4	CITY, ST, ZIP	WINTER PARK FL
12.5	NAME	
12.6	STREET ADDRESS	
12.7	CITY, ST, ZIP	
12.8	NAME	
12.9	STREET ADDRESS	
12.10	CITY, ST, ZIP	
12.11	NAME	
12.12	STREET ADDRESS	
12.13	CITY, ST, ZIP	
12.14	NAME	
12.15	STREET ADDRESS	
12.16	CITY, ST, ZIP	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	NAME	RUTH N. MOGUL	☒ Change ☐ Addition
13.2	STREET ADDRESS		
13.3	CITY, ST, ZIP		
13.4	NAME		☐ Change ☐ Addition
13.5	STREET ADDRESS		
13.6	CITY, ST, ZIP		
13.7	NAME		☐ Change ☐ Addition
13.8	STREET ADDRESS		
13.9	CITY, ST, ZIP		
13.10	NAME		☐ Change ☐ Addition
13.11	STREET ADDRESS		
13.12	CITY, ST, ZIP		
13.13	NAME		☐ Change ☐ Addition
13.14	STREET ADDRESS		
13.15	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 119.07(3)(b), Florida Statutes. Further, I certify that the information included on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registrar or transfer agent or escrow agent to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of a completed or completed statement with an address.

SIGNATURE:

Ruth N. Mogul

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 21, 1995 407-647-5111