

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J37625 (7)

1. Corporation Name

VECTOR REALTY & MANAGEMENT, INC.



Principal Place of Business

% KENNETH W. HERETICK
25 2ND ST. NO. SUITE 160
ST PETERSBURG FL 33701

Mailing Address

% KENNETH W. HERETICK
25 2ND ST. NO. SUITE 160
ST PETERSBURG FL 33701

3. Date Incorporated or Qualified
10/13/1986

3a. Date of Last Report
04/06/1995

2. Principal Place of Business

21 526 Central Avenue

Suite, Apt. #, etc.

22 Suite 200

City & State

23 St. Petersburg, FL

Zip

24 33701

Country

25 US

2a. Mailing Address

25 526 Central Avenue

Suite, Apt. #, etc.

27 Suite 200

City & State

28 St. Petersburg, FL

Zip

29 33701

Country

30 US

4. FEI Number

59-2743758

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

HERETICK, KENNETH W.
715 MARCO DR. N.E.
ST PETERSBURG FL 33702

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 607.0502 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

Signature, typed or printed name of registered agent and term applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PST
NAME HERETICK, KENNETH W.
STREET ADDRESS 715 MARCO DR. N.E.
CITY-ST-ZIP ST PETERSBURG FL ☐ DELETE

TITLE DVP
NAME HERETICK, KENNETH W.
STREET ADDRESS 715 MARCO DR NE
CITY-ST-ZIP ST. PETERSBURG FL ☐ DELETE

TITLE EVP
NAME BURSIK, PETER D.
STREET ADDRESS 7301 18TH ST NE
CITY-ST-ZIP ST PETERSBURG FL ☐ DELETE

TITLE AS
NAME BURSIK, PETER D.
STREET ADDRESS 7301 18TH ST NE
CITY-ST-ZIP ST PETERSBURG FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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 119.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Peter D. Bursik

Executive Vice President

4/30/96

813-823-1230

Daytime Phone #

CR2E034 (12/95)