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FILED

May 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J58169 (0)  
1. Corporation Name  
NEXUS REALTY CORPORATION



Principal Place of Business

355 NE FIFTH AVENUE, SUITE 4  
355 NE 5TH AVE. #4  
DELRAY BEACH FL 33483  
US

Mailing Address

355 NE FIFTH AVENUE, SUITE 4  
355 NE 5TH AVE. #4  
DELRAY BEACH FL 33483-5542  
US

3. Date Incorporated or Qualified  
02/20/1987

3a. Date of Last Report  
05/01/1996

2. Principal Place of Business

21 1908 S. Congress Ave

Suite, Apt. #, etc.

22 Suite 400

City & State

23 Boynton Beach FL

Zip

Country

24 33426 25 PB

2a. Mailing Address

26 1908 S. Congress Ave.

Suite, Apt. #, etc.

27 Suite 400

City & State

28 Boynton Beach FL

Zip

Country

29 33426

30 PB

4. FEI Number  
59-2804011

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

10. Name and Address of New Registered Agent

MORRELL, MICHAEL F.  
355 N.E. FIFTH AVE., SUITE 4  
DELRAY BEACH FL 33483

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)  
1908 S. Congress Avenue

83 Suite 400

84 City  
Boynton Beach

FL

85 Zip Code  
33426

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 title if applicable

(NOTE: Registered Agent signature required when re-issuing)

DATE

12. OFFICERS AND DIRECTORS

TITLE D [ ] DELETE

NAME MORRELL, MICHAEL F.  
STREET ADDRESS 355 NE 5TH AVE. #4  
CITY-ST-ZIP DELRAY BEACH FL

TITLE [ ] DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE [ ] DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE [ ] DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE [ ] DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE [ ] DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 does not qualify for the exemption stated in Section 119.07(3)(i), 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:

CR2E034 (9/96)