

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

CORPORATION  
ANNUAL REPORT

1995



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

DOCUMENT # J95344

(4)

1. Corporation Name

HARDY & CALLAWAY REALTY GROUP, INC.

Principal Place of Business

3697 LAKE EMMA ROAD  
LAKE MARY FL 32746-0384

Mailing Address

3697 LAKE EMMA ROAD  
LAKE MARY FL 32746-0384

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 APR - 7 AM 10:54

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business  21	2a. Mailing Address  26	3a. Date Incorporated or Qualified  09/29/1987	3a. Date of Last Report  03/24/1994
Suite, Apt. #, etc.  22	Suite, Apt. #, etc.  27	4. FEI Number  59-2851680	Applied For  Not Applicable
City & State  23	City & State  28	5. Certificate of Status Desired  <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
Zip  24	Country  29	6. Election Campaign Financing Trust Fund Contribution  <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent  SNIVELY, STEPHEN W 200 S ORANGE AVE ORLANDO FL 32801		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 title if applicable

(NOTE: Registered Agent signature required when nominating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HINES, JACK L. 3697 LAKE EMMA ROAD LAKE MARY FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CALLAWAY, PATRICK T. 3697 LAKE EMMA ROAD LAKE MARY FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HARDY, SUSAN T 3697 LAKE EMMA RD LAKE MARY FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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)(e), 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 DULCE CALLAWAY

3-31-95

(407) 333-2700

Date

Daytime Phone #