FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K29303 (0)

1. Corporation Name

SIMMONS FINANCIAL REALTY COMPANY, INC.

Principal Place of Business	Mailing Address
333 W. CAMINO GARDENS BLVD SUITE 201 BOCA RATON FL 33432	333 W. CAMINO GARDENS BLVD SUITE 201 BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/22/1988
3a. Date of Last Report: 09/08/1994
4. FEI Number: 65-0063972 — 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 [illegible] Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business: 21 ____ 22 Suite, Apt. # etc. ____ 23 City & State ____ 24 ____ 25 ____
2a. Mailing Address: 26 ____ 27 Suite, Apt. # etc. ____ 28 City & State ____ 29 ____ 30 ____

9. Name and Address of Current Registered Agent

SIMMONS, RICHARD E.
333 W CAMINO GARDENS BLVD
BOCA RATON FL 33432

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 ____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1 TITLE	☐ Change ☐ Addition
NAME	SIMMONS, RICHARD E.	1 NAME	
STREET ADDRESS	755 NE 32ND ST	1 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	1 CITY-ST-ZIP	
TITLE	VDS	2 TITLE	☐ Change ☐ Addition
NAME	SIMMONS, CAROLYN R.	2 NAME	
STREET ADDRESS	755 NE 32ND ST	2 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	2 CITY-ST-ZIP	
TITLE	~~T~~	3 TITLE	☒ Change ☐ Addition
NAME	~~WOOD, SUSAN~~	3 NAME	
STREET ADDRESS	~~16 SOUTH SWINTON~~	3 STREET ADDRESS	
CITY-ST-ZIP	~~DELRAY BEACH FL 33444~~	3 CITY-ST-ZIP	
TITLE		4 TITLE	☐ Change ☐ Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		5 TITLE	☐ Change ☐ Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 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)(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: Richard E. Simmons — 5-1-95 — (407)338-9290

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0259558 CP