

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

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra E. Morfitt  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 MAR 31 AM 11:29**

**DOCUMENT # K29699 (1)**

1. Corporation Name  
**KANTOR REALTY, INC.**

Principal Place of Business

**3949 EVANS AVE., #203-2  
FORT MYERS FL 33901**

Mailing Address

**3949 EVANS AVE., #203-2  
FORT MYERS FL 33901**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **07/22/1988** 3a. Date of Last Report **05/17/1994**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip

30 Country

4. FEI Number

**65-0062735**

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

**GOLDBERG, MORTON A.  
1515 BROADWAY  
FORT MYERS FL 33901**

10. Name and Address of New Registered Agent

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

**FL**

05 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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**  
NAME **KANTOR, LORI M.**  
STREET ADDRESS **13602 PINE VILLA LANE**  
CITY-ST-ZIP **FORT MYERS FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE **D**  Change  Addition  
1 2 NAME **KANTOR LORI M**  
1 3 STREET ADDRESS **3949 Evans AVE #203-2**  
1 4 CITY-ST-ZIP **FORT MYERS, FL 33901**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

2 1 TITLE

2 2 NAME

2 3 STREET ADDRESS

2 4 CITY-ST-ZIP

Change  Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

3 1 TITLE

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Change  Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

6 1 TITLE

6 2 NAME

6 3 STREET ADDRESS

6 4 CITY-ST-ZIP

Change  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)(b), 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:

*Lori M Kantor*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-28-95 513 338-920**

(Date)

(Telephone No.)