

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 24 AM 7:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L33332** (2)

1. Corporation Name

ABACUS REALTY, INC.

Principal Place of Business

Mailing Address

% JANET M. BERNFELD
3117 MILLER AVE., P.O. BOX 2259
LAKE PLACID FL 33852

% JANET M. BERNFELD
3117 MILLER AVE., P.O. BOX 2259
LAKE PLACID FL 33852

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/29/1989

3a. Date of Last Report

04/22/1994

4. FEI Number

59-2983522

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

2. Principal Place of Business

2a. Mailing Address

21 3117 Miller Ave.

26 3117 Miller Ave.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

23 Lake Placid, FL

28 Lake Placid, FL

24 Zip

Country

29 Zip

Country

24 33852

25 U.S.A.

29 33852

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BERNFELD, JANET M.
5501 WATERWAY DR
SEBRING FL 33872

81 Name

Janet M. Bernfeld

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

3046 Lake June Blvd.

83

84 City

Lake Placid

FL

85 Zip Code

33852

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME BERNFELD, JANET M.
STREET ADDRESS 5501 WATERWAY DR
CITY - ST - ZIP SEBRING FL

1.1 TITLE PD
1.2 NAME Bernfeld Janet M
1.3 STREET ADDRESS 3046 Lake June Blvd.
1.4 CITY - ST - ZIP Lake Placid, FL 33852
☒ Change ☐ Addition

TITLE VS
NAME WATERS, EDITH G.
STREET ADDRESS 1616 WOODSIDE DRIVE
CITY - ST - ZIP LEBANON TE

2.1 TITLE VS
2.2 NAME Waters, Edith G.
2.3 STREET ADDRESS 1616 Woodside Drive
2.4 CITY - ST - ZIP Lebanon, Tennessee 37087
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ 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)(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:

Janet M. Bernfeld Res. 4/18/95 (80) 699-1829

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Corporate Phone #