

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandwich, Williams
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
FILED**

55 MAY - 1 PM 9:26

REC'D SECRET STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L37357 (5)

1. Corporation Name

BIRCH LANDINGS REALTY, INC.

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified **12/18/1989** 3B. Date of Last Report **04/20/1994**

Principal Place of Business: **2300 SE OCEAN BLVD
A4-118
STUART FL 34996
US**
Mailing Address: **2300 SE OCEAN BLVD
A4-118
STUART FL 34996
US**

2. Principal Place of Business: **2300 SE OCEAN BLVD
A4-118
STUART FL 34996
US** 2a. Mailing Address: **2300 SE OCEAN BLVD
A4-118
STUART FL 34996
US**

21. State: **FL** 26. State: **FL**

22. City & State: **STUART FL** 27. City & State: **STUART FL**

23. City & State: **STUART FL** 28. City & State: **STUART FL**

24. City & State: **STUART FL** 25. City & State: **STUART FL** 29. City & State: **STUART FL** 30. City & State: **STUART FL**

4. FEI Number **65-0171888** Applied For: ☐ Not Applicable: ☐

5. Certificate of Status Desired: ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing: ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under the Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**ATKINSON, WILSON C. III
1946 TYLER STREET
HOLLYWOOD FL 33020**

10. Name and Address of New Registered Agent

81. Name: **ATKINSON, WILSON C. III**
82. Street Address (P.O. Box Number is Not Acceptable): **1946 TYLER STREET**
83. City: **HOLLYWOOD**
84. State: **FL** 85. Zip Code: **33020**

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation signed the statement for the purpose of changing its registered agent as herein provided for in the State of Florida, and that change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a resident of the State of Florida.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME	P ROBINSON, ANN E	NAME	☒ Change ☐ Addition
STREET ADDRESS	2300 SE OCEAN BLVD, A4-118	STREET ADDRESS	3893 S.W. WHISPERING SOUND DR
CITY	STUART FL	CITY	PALM CITY FL 34990
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 319.021, Florida Statutes. Further, I certify that the information supplied on this annual report or biennial annual report is true and accurate and that it is complete. I shall have the same legal effect as if made under oath. That any willful failure to file this report or the revision or failure to provide to make into this report as required by Chapter 640, Florida Statutes, and that any failure to provide to make into this report as required by Chapter 640, Florida Statutes, shall be a misdemeanor of the first degree.

SIGNATURE:

Ann E. Robinson
SIGNATURE AND TYPED OR PRINTED NAME OF GRADING OFFICER OR DIRECTOR

4/27/95

407.38 32167