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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:16

DOCUMENT # L42292 (7)

1. Corporation Name
AALEXANDER REALTY, INC.

Principal Place of Business	Mailing Address
13001 S TAMIAMI TR NORTH PORT FL 34287	13001 S TAMIAMI TR NORTH PORT FL 34287

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/08/1990
3a. Date of Last Report: 01/31/1994

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

4. FEI Number: 65-0167760 ☐ 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

LOGIE, ALEXANDER
13001 S TAMIAMI TR
1441 S CRANBERRY BLVD.
N PORT FL 34287

10. Name and Address of New Registered Agent

81 Name: Lundgren, Richard P., Sr.
82 Street Address (P.O. Box Number is Not Acceptable): 13001 S. Tamaiami Tr.
83: 4253 Persian Ln.
84 City: North Port, FL 85 Zip Code: 34287

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] Pres. 2/8/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when executing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P ☒ Change ☐ Addition
NAME	LOGIE, ALEXANDER	1.2 NAME	Lundgren, Richard P., Sr.
STREET ADDRESS	1441 S CRANBERRY BLVD.	1.3 STREET ADDRESS	4253 Persian Ln.
CITY-ST-ZIP	N PORT FL	1.4 CITY-ST-ZIP	North Port, FL 34287
TITLE	VD	2.1 TITLE	V ☒ Change ☐ Addition
NAME	LOGIE, IAN M.	2.2 NAME	Carol Lundgren
STREET ADDRESS	32 RIDGELINE RD	2.3 STREET ADDRESS	4253 Persian Ln.
CITY-ST-ZIP	EASTON CT	2.4 CITY-ST-ZIP	North Port, FL 34287
TITLE	SD	3.1 TITLE	☐ Change ☐ Addition
NAME	KELLY, CHARLES L.	3.2 NAME	No longer an officer.
STREET ADDRESS	30 PERCH RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	SHELTON CT	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	☐ Change ☐ Addition
NAME	BORDEAU, RICHARD	4.2 NAME	No longer an officer.
STREET ADDRESS	435 WINDLY HILL RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE CT	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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: [signature] president 2/8/95 813-426-5299
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #
RICHARD P. LUNDGREN SR.

0950324 CP