

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 APR 27 PM 3:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L46417 (6)

1. Corporation Name

CENTRAL FLORIDA H.A.N.D.S. REALTY, INC.

Principal Place of Business

2211 E. HILLCREST ST
496 S. DELANEY AVENUE, STE 402B
ORLANDO FL 32803
US

Mailing Address

2211 E. HILLCREST ST
496 S. DELANEY AVENUE, STE 402B
ORLANDO FL 32803
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
01/25/1990

3a. Date of Last Report
05/01/1994

4. FEI Number
59-3051873

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

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 2211 E. Hillcrest St.

2a. Mailing Address

26 same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Orlando, Fla.

City & State

28

24 32803

25 Orange

29

30

9. Name and Address of Current Registered Agent

HOOD, TANIA
711 W ARLINGTON ST
ORLANDO FL 32805

10. Name and Address of New Registered Agent

81 Name

Steven L. Chitwood

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

3204 Amherst St.

83

Orlando, Fla. 32804

84 City

FL

85 Zip Code
32804

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

Steven L. Chitwood

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

4/21/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	VOGT, PETE
STREET ADDRESS	5850 HANSEL AVE
CITY, ST, ZIP	ORLANDO FL
TITLE	DT
NAME	ANSLEY, BOB
STREET ADDRESS	455 S ORANGE AVE
CITY, ST, ZIP	ORLANDO FL
TITLE	D
NAME	CRIBBS, VICKI
STREET ADDRESS	1325 HILLWAY RD
CITY, ST, ZIP	APOPKA FL
TITLE	D
NAME	DYE, A. RICHARD
STREET ADDRESS	861 DOUGLAS AVENUE
CITY, ST, ZIP	ALTAMONTE SPRGS FL
TITLE	DP
NAME	HOOD, TANIA
STREET ADDRESS	496 S. DELANEY AVENUE
CITY, ST, ZIP	ORLANDO FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	Sec.-Treasurer
3.3 STREET ADDRESS	Ernesto Gonzalez
3.4 CITY, ST, ZIP	108 N. Wymore Rd. Winter Park, Fla. 32789
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	President
5.3 STREET ADDRESS	Steven L. Chitwood
5.4 CITY, ST, ZIP	3204 Amherst Orlando, Fla. 32804
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I 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)(b), Florida Statutes. I further certify that this information is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 13, as applicable, as an attachment with an address.

SIGNATURE:

Steven L. Chitwood

4/21/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature: Steven L.