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95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # L55247 (5)

1. Corporation Name

DUGUID REALTY CORP.

Principal Place of Business

% JENNIE LOMBARDI
3475 S OCEAN BLVD., APT. 605
PALM BEACH FL 33480-5947
US

Mailing Address

C/ FRANCES LOMBARDI
723 HIAWATHA BLVD., W.
SYRACUSE NY 13204
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/06/1990

3a. Date of Last Report

07/26/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FEI Number

65-0185006

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 (199
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LOMBARDI, JENNIE
3475 SOUTH OCEAN BLVD.
PALM BEACH FL 33480

10. Name and Address of New Registered Agent

81 Name

TARKY LOMBARDI JR

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

3475 SOUTH OCEAN BLVD

83

84 City

PALM BEACH

FL

85 Zip Code

33480

11. Pursuant to the provisions of Sections 607.0602 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 607.0601, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or person authorized to change registered agent or office)

(Signature of Registered Agent or person authorized to change registered agent or office)

4-28-95

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LOMBARDI, JENNIE
STREET ADDRESS	3475 S. OCEAN BLVD
CITY-ST-ZIP	PALM BEACH FL
TITLE	VPD
NAME	LOMBARDI, FRANCIS T
STREET ADDRESS	723 HIAWATHA BLVD., W
CITY-ST-ZIP	SYRACUSE NY
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PRESIDENT	☒ Change ☐ Addition
2. NAME	TARKY LOMBARDI JR	
3. STREET ADDRESS	3475 SOUTH OCEAN BLVD	
4. CITY-ST-ZIP	PALM BEACH FLORIDA 33480	
5. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-ST-ZIP		
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-ST-ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-ST-ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is accurately 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 biennial 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 owner or holder empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 as indicated, or on an addition with an address.

SIGNATURE:

(Signature of Registered Agent or person authorized to change registered agent or office)

4/28/95

215-442-0100