SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)				
PROFIT CORPORATION ANNUAL REPORT 1996	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUMENT # L56674	(9)		-	
SECURITY ATLANTIC REALTY CORP. Principal Place of Business Mailing Address				
Principal Place of Business	Mailing Address			
% MARILYN T. HUGHES 619 S FED HWY BOCA RATON FL 33432 US	BOCA RATON FL 33432		3. Date Incorporated or Qualified	3a, Date of Last Report
2. Principal Place of Business	2a. Mailing Address		03/12/1990 4. FEI Number	04/27/1995 Applied For
Suite Apt # etc	26		65-0340041	Not Applicable
22	Suite, Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
Zip Country	Zφ	Country	Trust Fund Contribution 8. This corporation has liability for	intangible tax under s. 199 032,
24 25 9. Name and Address of Current F	29 legistered Agent	30	Florida Statutes 10. Name and Address of New Re	Yes (V) No
HUGHES, MARILYN T. 1035 SPANISH RIVER RD \$2 Street Address (P.O. Box Number is 16t Acceptable) 82 Street Address (P.O. Box Number is 16t Acceptable) 83 84 City Dradan FL 85 Zip Code 93 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 uffice 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 1 am familiar with find adcept the bulgations of, Section 607,0505, Florida Statutes. 84 Street Address (P.O. Box Number is 16t Acceptable) 85 Zip Code 97 Zip Code 98 Zip Code 99 Zip Code 99 Zip Code 99 Zip Code 90 Zip Code 9				
	natice dapposition (เคามา DIRECTORS	Registered Agest I griatine r	equired when relocating - ADDITIONS/CHANGES TO OFFIC	DATE
TITLE PST	DELETE	1 1 Tills 6	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME HUGHES, MARILYN T. STREET ADDRESS 14035 SPANISH RIVER \$205 CITY-ST-ZIP BOCA RATON FL		1.2 NAME 1.3 STREET ADDRESS 1.4 CHY+ST+ZIP	619 South Federa	CERS AND DIRECTORS IN 12 Change Addition 88
TITLE	DELETE	2 1 TITLE	THE PERSON NAMED IN COLUMN TO SERVICE OF THE PERSON OF THE	Change Addition
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CITY-ST-ZIP TITLE	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
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TITLE	DELETE	6 1 TITLE		Change Addition
NAME STREET ADDRESS		6.2 NAME 6.3 STHEET ADDRESS		
City-ST-ZiP 14. I do hereby ced forthat the information supposed w	th this filing is valuatarily for	64 CITY - ST ZIP	uality for the execution start for Control	10.07/0V() Elect- Con-
14. I do hereby cert by that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 eath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and				
SIGNATURE: SIGNATURE: SIGNATURE SIGNING OFFICER OF PRINCE F SIGNING OFFICER OF PRINCE OF PRINCE OF SIGNING OFFICER OF DIRECTOR OFFICER OF PRINCE OF SIGNING OFFICER OF DIRECTOR OFFICER OF SIGNING OFFICER OF DIRECTOR OFFICER OF SIGNING OFFICER OF DIRECTOR OFFICER				