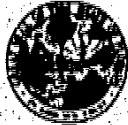


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED
95 APR 25 AM 8:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L77893

(0)

1. Corporation Name

MARKHAM WOODS REALTY, INC.

Principal Place of Business

2200 GORDON DRIVE
NAPLES FL 33940

Mailing Address

2200 GORDON DRIVE
NAPLES FL 33940

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/05/1990

3a. Date of Last Report

04/14/1994

4. FEI Number

59-3014074

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

A.G.C. CO.
2300 SUN BANK CENTER, 200 S ORANGE AVE.
ORLANDO FL 32801

81 Name

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

83

84 City

FL

85 Zip Code

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

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

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S
NAME SEXTON, DAVID N
STREET ADDRESS 1167 THIRD ST SO
CITY- ST- ZIP NAPLES FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

TITLE PD
NAME DE GROOTE, MICHAEL H., JR
STREET ADDRESS 1100 BURLOAK DRIVE
CITY- ST- ZIP BURLINGTON, ONT, CAN.

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

TITLE DV
NAME PEKARUK, JERRY
STREET ADDRESS 1100 BURLOAK DRIVE
CITY- ST- ZIP BURLINGTON, ONT, CAN.

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

TITLE V
NAME KAYE, STUART O
STREET ADDRESS 3060 PLAYER'S POINT
CITY- ST- ZIP LONGWOOD FL

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME CAMERON KICKLIGHTER
4.3 STREET ADDRESS 2150 W. STATE ROAD 434, SUITE 2110
4.4 CITY- ST- ZIP LONGWOOD, FL 32719

TITLE DV
NAME LUCHAK, FRED
STREET ADDRESS 11 VICTORIA STREET, P.O. BOX HM 1065
CITY- ST- ZIP HAMILTON HMEX BE

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE VS
NAME UNDERWOOD, ROBERT
STREET ADDRESS 1768 ALAQUA DRIVE
CITY- ST- ZIP LONGWOOD FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 110.07(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 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:

Jerry Pekaruk
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JERRY PEKARUK

4/18/95

P13-2616436