## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

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DOCUMENT # L95224

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TRADER RAY REALTY, IN	IC.

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Principal Place	or Musiness		rV1€	an-iô wariezz					
1625 COLONIAL	L BLVD.			625 COLONIAL BLVD. i-e					
S-E FT. Myers FL 33907			T. MYERS FL 33907			3. Date Incorporated or Qualified	3a. Date of	Last Report	
							08/21/1990 08/08/199		
2. Principal Pla	ce of Business		2a.	Mailing Address			4. FEI Number		Applied For
1			26	Crite Act # oto			65-0219437	2	Not Applicable  8.75 Additional
Suite, Apt #	, etc		27	Suite, Apt #, etc.			5. Certificate of Status Desired		Fee Required
City & State			12,1	City & State			6. Election Campaign Financing		\$5.00 May Be
3			28				Trust Fund Contribution		Added to Fees
Zip	Cour	ntry		Zιρ	Coun	try	8. This corporation has liability for Florida Statutes	intangible tax t Yes 🙀 N	
4	9. Name and Add	lease of Current	29 Regis	tored Anent	30		10. Name and Address of New Re		
		iress of Current	negis	tered Agent		31 Name		¥	
	, ROBERT C.				l-	32 Street Add	dress (P.O. Box Number is Not Acceptat	ble)	
	1 FIRST ST.				Ĺ	Direct rick	areas (i.o. ber hame)		
rı.	MYERS FL 33901				[1	B3			
					1	84 City		FL	5 Zip Code
							poration submits this statement for the p		aning to require
agent I an	Signature Typed or printed in	iamic of registered ager	t and bill	t applicable (f	OTE Registered	Agent signature req	jured when reinstating)	DATE	
SIGNATURE	5'gnature Typed or printed n					Agent signature req			RECTORS IN 12
SIGNATURE 3		amic of registered ager OFFICERS AND			OTE Registered  13.		uired when reinstating) ADDITIONS/CHANGES TO OFFI		
SIGNATURE	PD	OFFICERS AND		CTORS	13.	E			
SIGNATURE 5		OFFICERS AND  ROLD C.		CTORS	13. 11 THE 12 NAT	E			
SIGNATURE  12.  TITLE  NAME	PD SHIREMAN, HA	OFFICERS AND  ROLD C.		CTORS DELETE	13. 11 TOU 12 NAM 13 STF 14 CO	ME REET ADDRESS Y - ST - ZIP			Change Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	PD SHIREMAN, HA 1956 GOLFVIEV	OFFICERS AND  ROLD C.		CTORS	13. 11 THU 12 NAP 13 STF 14 CH 21 THU	LE  REE1 ADDRESS  Y - ST - ZIP  LE			Change Addition
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SIGNATURE  112.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHIREMAN, HA 1956 GOLFVIEV	OFFICERS AND  ROLD C.		CTORS  DELETE	13. 1 1 THL 1 2 NA 1 3 STF 1 4 CIT 2 1 THL 2 2 NAI 2 3 STF 2 4 CIT	LE ME REEL ADDRESS Y-SI-ZIP LE ME REEL ADDRESS TY-SI-ZIP LE			Change Addition
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRINCED PRINTED IN AUG. (1996 941-939-0101