SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 8/0/95: $275 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $370)

PROFIT CORPORATION ANNUAL REPORT 1995

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

FILED
95 JUL 10 AM 9:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M48970 (1)

1. Corporation Name
DARBY PROPERTIES, INC.

Principal Place of Business	Mailing Address
% KITTY TAYLOR 13741 DOWNING LANE FT. MYERS FL 33919	% KITTY TAYLOR 13741 DOWNING LANE FT. MYERS FL 33919

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/24/1987
3a. Date of Last Report: 04/27/1994

2. Principal Place of Business
21 c/o Kitty Taylor
Suite, Apt. #, etc.
22 7401 Estero Blvd
City & State
23 Ft. Myers Beach, FL
24 Zip: 33931
25 Country:

2a. Mailing Address
26 c/o Kitty Taylor
Suite, Apt. #, etc.
27 7401 Estero Blvd
City & State
28 Ft. Myers Beach, FL
29 Zip: 33931
30 Country:

4. FEI Number: 13-3436495 ☐ 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

9. Name and Address of Current Registered Agent

TAYLOR, KITTY
13741 DOWNING LANE
FT. MYERS FL 33919

10. Name and Address of New Registered Agent

81 Name: Taylor, Kitty
82 Street Address (P.O. Box Number is Not Acceptable): 7401 Estero Blvd
83
84 City: Ft. Myers Beach, FL 85 Zip Code: 33931

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	HAKIM, JOSEPH E.	1.2 NAME	Hakim, Joseph E.	
STREET ADDRESS	100 EAST 42ND STREET	1.3 STREET ADDRESS	500 Fifth Ave., Ste 4700	
CITY-ST-ZIP	NEW YORK NY	1.4 CITY-ST-ZIP	New York, NY 10110	
TITLE	DST	2.1 TITLE	T	☒ Change ☐ Addition
NAME	DUNN, BRYAN R. OFF	2.2 NAME	Corcoran, Robert W.	
STREET ADDRESS	100 EAST 42ND STREET	2.3 STREET ADDRESS	500 Fifth Avenue, Ste 4700	
CITY-ST-ZIP	NEW YORK NY	2.4 CITY-ST-ZIP	New York, NY 10110	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

CR2E034 (3/95)

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 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 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: Robert W. Corcoran 6/28/95 (212) 764-4675
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ROBERT W. CORCORAN, TREASURER

0161443 FP