

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # M73703 (4)

95 MAY -1 AM 8:07

NORTHEAST SEVENTH CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: 115 N.E. SEVENTH AVE. GAINESVILLE FL 32601
Mailing Address: 115 N.E. SEVENTH AVE. GAINESVILLE FL 32601

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified 03/24/1988		3a. Date of Last Report 06/15/1994	
4. FEI Number 18-7407795		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. Does corporation have liability for alternative tax under Florida Statutes ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent WEISS, MICHAEL H. 115 N.E. SEVENTH AVE. GAINESVILLE FL 32601		10. Name and Address of New Registered Agent 81 Name 82 Street Address (R.F.D. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 607 (0507 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 (0509, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1. TITLE	☐ Change ☐ Addition
NAME	WEISS, MICHAEL H.	2. NAME	
STREET ADDRESS	1010 NW 25TH TERR.	3. STREET ADDRESS	
CITY, ST, ZIP	GAINESVILLE FL	4. CITY, ST, ZIP	
TITLE	VP	5. TITLE	☐ Change ☐ Addition
NAME	WEISS, JOYCE	6. NAME	
STREET ADDRESS	1010 N.W. 25TH TERR.	7. STREET ADDRESS	
CITY, ST, ZIP	GAINESVILLE FL	8. CITY, ST, ZIP	
TITLE		9. TITLE	☐ Change ☐ Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY, ST, ZIP		12. CITY, ST, ZIP	
TITLE		13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY, ST, ZIP		16. CITY, ST, ZIP	
TITLE		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY, ST, ZIP		20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this block is voluntarily furnished and does not qualify for the exemption stated in Section 139.07(4)(b), Florida Statutes. I further certify that the information included 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, 2 or Block 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, or on an attachment with an address.

SIGNATURE:

Joyce H. Weiss
SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR
JOYCE H. WEISS

4/28/95 (904) 374-8616