FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **M77581** **(0)**

1. Corporation Name

DYNAMIC REALTY OF ST. LUCIE COUNTY, INC.

Principal Place of Business	Mailing Address
298 N.E. GLENTRY AVENUE PORT ST. LUCIE FL 34983	298 N.E. GLENTRY AVENUE PORT ST. LUCIE FL 34983

3. Date Incorporated or Qualified: 04/22/1988
3a. Date of Last Report: 04/26/1995

2. Principal Place of Business	2a. Mailing Address
21 2291 SHELTER DR.	26 2291 SHELTER DR.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: PT. ST. LUCIE, FL	28 City & State: PT. ST. LUCIE, FL
24 Zip: 34952 25 Country: USA	29 Zip: 34952 30 Country: USA

4. FEI Number: 65-0047701 ☐ 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

WAYNO, JEROME W., JR.
~~298 N.E. GLENTRY AVENUE~~
PORT ST. LUCIE FL ~~34983~~

10. Name and Address of New Registered Agent

81 Name: JEROME W. WAYNO, JR
82 Street Address (P.O. Box Number is Not Acceptable): 2291 SHELTER DR.
83
84 City: PT. ST. LUCIE FL 85 Zip Code: 34952

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	WAYNO, JEROME W., JR.		1.2 NAME	
STREET ADDRESS	298 N.E. GLENTRY AVE.		1.3 STREET ADDRESS	2291 SHELTER DR.
CITY-ST-ZIP	PORT ST. LUCIE FL		1.4 CITY-ST-ZIP	PT. ST. LUCIE, FL 34952
TITLE	DS	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	WAYNO, SHARON.		2.2 NAME	
STREET ADDRESS	298 N.E. GLENTRY AVE.		2.3 STREET ADDRESS	2291 SHELTER DR.
CITY-ST-ZIP	PORT ST. LUCIE FL		2.4 CITY-ST-ZIP	PT. ST. LUCIE, FL 34952
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (12/95)

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: _____ JEROME W. WAYNO, JR 4-3-96 (407) 337-5282
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #