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CORPORATION
ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 23 PM 3:16

DOCUMENT # **M77661** **(0)**

1. Corporation Name

BRUGGER'S ESTATE APPRAISAL & LIQUIDATION SERVICE S, INC.

Principal Place of Business	Mailing Address
77 EMERALD WOODS DR., UNIT I-2 NAPLES FL 33963	77 EMERALD WOODS DR., UNIT I-2 NAPLES FL 33963

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 339 3rd Ave, N.	26 P.O. Box 9331
22 Suite, Apt #, etc	27 Suite, Apt #, etc
23 City & State: NAPLES, FLA	28 City & State: NAPLES, FLA
24 Zip: 33940 / 25 Country: Collier	29 Zip: 33941 / 30 Country: Collier

3. Date Incorporated or Qualified: 04/22/1988
3a. Date of Last Report: 05/23/1994
4. FEI Number: 59-2891965 — 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

BURGGER, JOHN N.
600 FIFTH AVE. S., SUITE 210
NAPLES FL 33940

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	BRUGGER, SANDRA S.
STREET ADDRESS	77 EMERALD WOODS DR.
CITY ST ZIP	NAPLES FL
TITLE	VD
NAME	BRUGGER, SANDRA S.
STREET ADDRESS	77 EMERALD WOODS DR.
CITY ST ZIP	NAPLES FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE		[ ] Change [ ] Addition
1 NAME		
1 STREET ADDRESS		
1 CITY ST ZIP		
2 TITLE		[ ] Change [ ] Addition
2 NAME		
2 STREET ADDRESS		
2 CITY ST ZIP		
3 TITLE		[ ] Change [ ] Addition
3 NAME		
3 STREET ADDRESS		
3 CITY ST ZIP		
4 TITLE		[ ] Change [ ] Addition
4 NAME		
4 STREET ADDRESS		
4 CITY ST ZIP		
5 TITLE		[ ] Change [ ] Addition
5 NAME		
5 STREET ADDRESS		
5 CITY ST ZIP		
6 TITLE		[ ] Change [ ] Addition
6 NAME		
6 STREET ADDRESS		
6 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 119.07(1), 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. SANDRA S. BRUGGER

SIGNATURE: Sandra P. Brugger 2-14-95 813 597 9590

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0483350 FP