

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 8:38

DOCUMENT # M80689 (6)

1. Corporation Name

RELOCATION APPRAISALS & CONSULTANTS, INC.

Principal Place of Business

634 BLAIRSHIRE CIRCLE
WINTER PARK FL 32792

Mailing Address

634 BLAIRSHIRE CIRCLE
WINTER PARK FL 32792

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/05/1988

3a. Date of Last Report

05/14/1994

4. FEI Number

59-2964501

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

State, Apt. #, etc.

22

State, Apt. #, etc.

27

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLOWER, BRUCE W.
511 NORTH MAITLAND AVE.
MAITLAND FL 32751

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

(Signature of Current Registered Agent and the Corporation)

(Signature of Registered Agent (Signature required when registering))

DATE

12. OFFICERS AND DIRECTORS

11

D
JOHNSON, EDWARD L., JR
634 BLAIRSHIRE CIRCLE
WINTER PARK FL

NAME

STREET ADDRESS

CITY-ST-ZIP

12

NAME

STREET ADDRESS

CITY-ST-ZIP

13

NAME

STREET ADDRESS

CITY-ST-ZIP

14

NAME

STREET ADDRESS

CITY-ST-ZIP

15

NAME

STREET ADDRESS

CITY-ST-ZIP

16

NAME

STREET ADDRESS

CITY-ST-ZIP

17

NAME

STREET ADDRESS

CITY-ST-ZIP

18

NAME

STREET ADDRESS

CITY-ST-ZIP

19

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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 110.07(3)(b), Florida Statutes. I further certify that the information submitted 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, as appropriate.

SIGNATURE:

(Signature and Typed Name of Signing Officer or Director)

Edward L. Johnson, Jr.

3/9/95

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644 2622