

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # M91135 (7)

1. Corporation Name:

SANDERS REAL ESTATE COMPANY, INC.

Principal Place of Business:

**2514 SOUTH FERDON BLVD.
CRESTVIEW FL 32536
US**

Mailing Address:

**2514 SOUTH FERDON BLVD.
CRESTVIEW FL 32536
US**

**APPROVED
AND
FILED**

5:11 PM 1:41

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/27/1988	3a. Date of Last Report 04/01/1994
4. FBI Number 59-2904859	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 § 199.032, Florida Statutes. ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Country	28. Country
24. Country	29. Country

9. Name and Address of Current Registered Agent

**SANDERS, ELMER V.
2514 SOUTH FERDON BLVD.
CRESTVIEW FL 32536**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	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 Sections 607.0502, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. NAME	P SANDERS, ELMER V.
2. STREET ADDRESS	114 JONES ROAD.
3. CITY, ST., ZIP	CRESTVIEW FL
4. NAME	ST MYLER, CAROLYN J.
5. STREET ADDRESS	6067 BUD MOULTON RD.
6. CITY, ST., ZIP	CRESTVIEW FL
7. NAME	
8. STREET ADDRESS	
9. CITY, ST., ZIP	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST., ZIP	
13. NAME	
14. STREET ADDRESS	
15. CITY, ST., ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	☐ Change ☐ Addition
2. NAME	
3. NAME	
4. NAME	
5. NAME	
6. NAME	
7. NAME	
8. NAME	
9. NAME	
10. NAME	
11. NAME	
12. NAME	
13. NAME	
14. NAME	
15. NAME	

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 199.032, Florida Statutes. I declare under oath 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. I am an officer or director of the corporation or the manager or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 1 of a change, or on an affidavit with an address.

SIGNATURE:

Elmer V. Sanders
Elmer V. Sanders, President
SIGNATURE AND TYPED ON PRINTED NAME OF OFFICER OR DIRECTOR

4/27/95

904 682-4300