FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N07081 (5)

1. Corporation Name

SOUTHWEST FLORIDA REAL ESTATE EXCHANGORS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
8510 GRANITE CT FT MYERS FL 33908 US	PO BOX 1354 FT MYERS FL 33902 US

3. Date Incorporated or Qualified: 01/14/1985
3a. Date of Last Report: 10/28/1994
4. FEI Number: 59-2364728 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BUNSCHU, CHARLES JR 8510 GRANITE CT FT MYERS FL 33908	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	BUNSCHU, CHARLES	1.2 NAME	Raymond J. Forbes	
STREET ADDRESS	8510 GRANITE CT	1.3 STREET ADDRESS	1741 Colonial Blvd.	
CITY-ST-ZIP	FT MYERS FL 33908	1.4 CITY-ST-ZIP	Ft. Myers, FL 33907	
TITLE	DV	2.1 TITLE	DV	☒ Change ☐ Addition
NAME	RUBENSTEIN, ANN	2.2 NAME	James Collier	
STREET ADDRESS	5020 SW 5TH PL	2.3 STREET ADDRESS	3916 Cleveland Ave.	
CITY-ST-ZIP	CAPE CORAL FL 33914	2.4 CITY-ST-ZIP	Ft. Myers, FL 33901	
TITLE	DT	3.1 TITLE	DT/S	☒ Change ☐ Addition
NAME	MCCREEON, OLGA	3.2 NAME	Olga McCree	
STREET ADDRESS	726 SW 51ST TER	3.3 STREET ADDRESS	726 S.W. 51st Terr.	
CITY-ST-ZIP	CAPE CORAL FL 33914	3.4 CITY-ST-ZIP	Cape Coral, FL 33914	
TITLE	D	4.1 TITLE	D	☒ Change ☐ Addition
NAME	MCMENAMY, JAMES	4.2 NAME	Chuck Bundschu	
STREET ADDRESS	8140 COLLEGE PKWY	4.3 STREET ADDRESS	8510 Granite Ct.	
CITY-ST-ZIP	FT MYERS FL	4.4 CITY-ST-ZIP	Ft. Myers, FL 33908	
TITLE	D	5.1 TITLE	D	☒ Change ☐ Addition
NAME	FINLEY, DIANE	5.2 NAME	Ed Stapleton	
STREET ADDRESS	861 IRIS DR	5.3 STREET ADDRESS	4731 Vincennes Blvd.	
CITY-ST-ZIP	N. FT. MYERS FL	5.4 CITY-ST-ZIP	Cape Coral, FL 33904	
TITLE	D	6.1 TITLE	D	☒ Change ☐ Addition
NAME	LACEY, LINN	6.2 NAME	Paul Germaine	
STREET ADDRESS	5510 SW 4TH PL	6.3 STREET ADDRESS	1850 Victoria Ave.	
CITY-ST-ZIP	CAPE CORAL FL 33914	6.4 CITY-ST-ZIP	Ft. Myers, FL 33901	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Olga L. McCree, Secretary 4/26/95 813-549-6058
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #

0048080