

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 13 AM 11:26

DOCUMENT # P28827 (4)

1. Corporation Name

FLORA REAL ESTATE MANAGEMENT COMPANY

Principal Place of Business

111 SECOND AVE., N.E.
STE. 911
ST. PETERSBURG FL 33701
US

Mailing Address

111 SECOND AVE., NE
STE. 911
ST. PETERSBURG FL 33701
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/09/1990

3a. Date of Last Report

04/27/1994

4. FEI Number

65-0182539

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

LANDRY, KENNETH O
111 SECOND AVE., NE
STE. 911
ST. PETERSBURG FL 33701

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE V
NAME LANDRY, KENNETH O
STREET ADDRESS 111 SECOND AVE., NE, #911
CITY-ST-ZIP ST. PETERSBURG FL

TITLE P
NAME JUELL, BRUCE
STREET ADDRESS 11400 W. OLYMPIC BLVD.
CITY-ST-ZIP LOS ANGELES CA

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

1.1 TITLE P/D ☒ Change ☐ Addition
1.2 NAME LANDRY, KENNETH O.
1.3 STREET ADDRESS 111 Second Avenue, N.E., Suite 911
1.4 CITY-ST-ZIP St. Petersburg, Florida 33701

2.1 TITLE S/T/D and CFO ☒ Change ☐ Addition
2.2 NAME ROBERSON, LAUREN
2.3 STREET ADDRESS 11400 West Olympic Blvd., 3rd Floor
2.4 CITY-ST-ZIP Los Angeles, California 90064

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(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; the recorder 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
LAUREN ROBERSON

February 16, 1995 (310) 312-2401

Date

(Type in Form 4)