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95 MAY -1 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P33973 (9) 1. Corporation Name REALTY SOUTHERN VENTURES, INC.			
Principal Place of Business 8737 COLESVILLE RD. SUITE 800 SILVER SPRING MD 20910		Mailing Address 8737 COLESVILLE RD. SUITE 800 SILVER SPRING MD 20910	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip Country	
9. Name and Address of Current Registered Agent % MATTHEW LUNDSTROM REALTY INVESTMENT COMPANY INC. 2447 N. WICKHAM RD. STE. 118 MELBOURNE FL 32935		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 the filer) Signature (typed or printed name of registered agent and the filer) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD BAINUM, STEWART 8737 COLESVILLE RD., SUITE 800 SILVER SPRING MD	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY ST ZIP	☐ Change ☐ Addition 100001485261 -05/12/95--01020--007 *****225.00 *****225.00
TITLE NAME STREET ADDRESS CITY ST ZIP	VD EVERNGAM, WILLIAM H., III 8737 COLESVILLE RD., SUITE 800 SILVER SPRING MD	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	S DONNELLY, RUTH 8737 COLESVILLE ROAD, SUITE 800 SILVER SPRING MD	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	VASD BOWDITCH, PATRICIA L. 8737 COLESVILLE RD., SUITE 800 SILVER SPRING MD	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY ST ZIP	☐ Change ☐ Addition

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 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.

SIGNATURE: Patricia L. Bowditch, V.P.
Patricia L. Bowditch, Vice-President

5/10/95
5/10/95

301-495-4400