

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P34092**

(7)

1. Corporation Name

EAST SOUND REALTY, INC.



Principal Place of Business

**4090 HALDEMAN CREEK DRIVE
NAPLES FL 33962**

Mailing Address

**4090 HALDEMAN CREEK DRIVE
NAPLES FL 33962**

3. Date Incorporated or Qualified
05/28/1991

3a. Date of Last Report
04/14/1995

2. Principal Place of Business

21 **4342 YACHT HARBOR DR**

2a. Mailing Address

26 **4343 YACHT HARBOR DR**

4. FEI Number
31-1326253

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

City & State

23 **NAPLES FL**

City & State

28 **NAPLES FL**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

Zip Country

24 **33962**

Zip Country

29 **33962**

30

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

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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 this if applicable

(NO. 1: Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD
HEREN, DIETER**
STREET ADDRESS **41 SOUTH HIGH STREET**
CITY-STATE-ZIP **COLUMBUS OH**

TITLE ☐ DELETE

NAME **S
LIEBERSBACH, JOHN**
STREET ADDRESS **41 SOUTH HIGH STREET**
CITY-STATE-ZIP **COLUMBUS OH**

TITLE ☐ DELETE

NAME **T
VANFLEET, JOHN**
STREET ADDRESS **41 SOUTH HIGH STREET**
CITY-STATE-ZIP **COLUMBUS OH**

TITLE ☐ DELETE

NAME **V
ULEN, ILONA**
STREET ADDRESS **41 SOUTH HIGH STREET**
CITY-STATE-ZIP **COLUMBUS OH**

TITLE ☐ DELETE

NAME **V
HANSON, SUSAN**
STREET ADDRESS **41 SOUTH HIGH STREET**
CITY-STATE-ZIP **COLUMBUS OH**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Susan J. Hanson **Susan J. Hanson**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/96
Date

614/Y80-4505
Division Phone #

CR2E034 (12/95)