FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 03 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

SIGNATURE:

1600 N ORANGE AVE

ORLANDO FL 32804

SUITE 1100

US

DOCUMENT # P9200005922 (9)

Mailing Address
1600 N ORANGE AVE

ORLANDO FL 32804-6405

SUITE 1100

THOMAS GREGORY REALTY AND DEVELOPMENT, INC.

						11/16/1992	03	/26/1996		
•	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	mber Applied For			
21		26	26			59-3149647		t Applicable		
Suite, Apt	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A		
27						5. Octaios of States Desired		Fee Re	quired	
City & State City & State						6. Election Campaign Financing	g	\$5.00	May Be	
23	28					Trust Fund Contribution	<u> </u>	Added t	o Fees	
Zip	Country	Zφ	Co	ountry		8. This corporation has liability			199.032,	
24	25	29	30			Florida Statutes	Yes			
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New	Registered	i Agent		
MCC	BEE, THOMAS J			81	Name					
1600 N ORANGE AVE					82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE 1100					Silver Address (r. O. Dox Namber is Not Acceptable)					
	ANDO FL 32804			83						
Ont	ANDO FE S2004									
				84	City	•	FI	85 Zip (Code	
44 5	to the second Control CO	DEO2 and CO7 1509 Florida Stat	lutor the	abovo	named core	poration submits this statement for t			s registered	
office or	registered agent, or both, in the St	ale of Florida. Such change wa	s authoriz	ed by	the corporat	tion's board of directors. I hereby a	coept the ar	pointment as	registered	
agent. La	am familiar with, and accept the of	oligations of, Section 607.0505,	Florida St	atutes.	•					
SIGNATURE										
	Signature, typed or printed name of registered				it signature requir	red when reinstating) ADDITIONS/CHANGES TO O	DATE ECICEDO AN	ID DIBECTOR	C IN 12	
12.	OFFICERS AND DIRECTORS		13			ADDITIONS/CHANGES TO O	FIOLIS A	Change	Addition	
141.0	PSD	_		TITLE				C trialige	L Addition	
NAME	MCGEE, THOMAS J		1.2	NAME						
STREET ADDRESS	1600 N ORANGE AVE		1.3	STREET A	ADDRESS					
CITY ST ZIP	ORLANDO FL		1.4	CITY-ST	- ZIP					
TOLE		☐ DELETE	21	TITLE				Change	Addition	
NAME			22	NAME						
STREET ADDRESS			2.3	STREET	ADDRESS		en 34-			
CITY - ST - ZIF			2.4	4 CITY - ST	T-ZIP		,			
11116		DELETE	3.1	TITLE				Change	Addition	
NAV*			3.2	NAME						
STREET ADDRESS				STREET	ADORESS					
				CITY-S						
CIFY-ST-7IP		DELETE		TITLE	1-21			Change	Addition	
TITLE		Und Occile	1	2 NAME						
NAME					*DDDCCC					
STREET ACCRESS					ADDRESS					
CHY+ST-ZIP		Dr. trt		CITY-ST	- ZIP			Change	Addition	
THEF		L_] DELETE		TITLE				L Criange	L. Aguinoli	
NAME				NAME						
STREET ADDRESS			5.3	STREET	ADDRESS					
C(11Y+S1+20F)			5.4	CITY-ST	I-ZIP					
THEF		☐ DELETE	6.1	TITLE				Change	Addition	
NAME			6.2	NAME	ĺ					
STREET ADDRESS			6.3	STREET	ADDRESS					
0.19 61 20			6.4	4 CITY - ST	T-ZIP					
14. I do here	eby certify that the information sup-	plied with this filing does not qu	alify for th	he exer	mption state	d in Section 119,07(3)(i), Florida Sta	atutes. I furth	ner certify that	the	
informati	ion indicated on this annual report	or supplemental annual report i	is true and	d accu	rate and that	at my signature shall have the same	legal effect	as if made un	ider oath; tha name	
appears	in Block 12 or Block 13 if change	, or on an attachment with an	ddress.	~ 0,000	ato and ropo	d in Section 119.07(3)(i), Florida Sta t my signature shall have the same ort as required by Chapter 607, Flori	- 3 - 3 - 3 - 3 - 3 - 3			

THOMAS J. MOGEE 3-31-47