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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P93000023591 (9)

THE REAL ESTATE BOOK OF CENTRAL FLORIDA, INC.

Principal Place of Business Mailing Address 3101 SW 34TH AVENUE 2058 SW 37TH STREET ROAD SUITE 905-263 OCALA FL 34474 OCALA FL 34474 3. Date Incorporated or Qualified 3a. Date of Last Report 03/26/1993 01/20/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-3179796 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zin Country Ζıp Country This corporation has liability for intangible tax under s 199.032. 24 25 29 30 Florida Statutes Yes Who 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FLANAGAN, GREGORY S Street Address (P.O. Box Number is Not Acceptable) 82 1 NE 1ST AVENUE SUITE 303 В3 OCALA FL 34470 84 City 85 Zio 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 familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. Sit patiene, typical or printed name of registered agon; and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THEF DELETE 1. 1 TITLE ☐ Change ☐ Addition NAME MILLER, SHARON L 1.2 NAME STREET ADDRESS 2058 SW 37TH STREET RD 1.3 STREET ADORESS C-14 - ST - Z P OCALA FL 34474 14 CHY-\$1-7IP Talle DELETE 2 1 THILE Change Addition NAME MILLER, BRUCE A 22 NAME 2058 SW 37TH STREET RD STREET AFFICEESS. 2.3 STREET ADDRESS OCALA FL 34474 CHY-\$1-26 24 CITY-ST-ZIP TITLE DELETE 3 1 TITLE Change Addition MAME 3.2 NAME STREET ACCURESS 3.3 STREET ADDRESS 34 CITY - ST-ZIP TILLE DELETE 4 1 TITLE Change Addition A NAM 42 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY ST ZIP 4.4 CITY - ST - ZIP 3111.5 DELETE 5 1 TITLE Change ☐ Addition NAME 5 2 NAME STREET ADDRESS. 5 3 STREET ADDRESS OTY - \$1 - 716 5 4 CITY - ST - ZIP THAT DELETE 6. 1 TITLE ☐ Change ☐ Addition NAM 62 NAME STREE ADDRESS 6.3 STREET ADDRESS CL'Y - S1 - Z12 64 CITY - ST-ZIP 14. I do horeby 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 certify that I am an officer or director of the comporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRECTOR

1/24/96 352.8572399 Okis Daylane Proce # CR2E034 (12/95)