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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P93000024961 (3)

MAGLICH REALTY, INC.



Principal Place of Business Mailing Address					A**** *****			
4752 ACORN SARASOTA F	CIRCLE	4752 ACORN CIRCLE SARASOTA FL 34233						
SARASUIA F	L 34233	UNIDOOD IE VIEW	SANASUIA EL SALSS		3. Date Incorporated or Qualified 3a. Date of Last Report 03/31/1993 06/13/1995			
, Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number 65-0399865	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apl. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & State		Orty & State	City 8 State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zιρ	Country	Zip	Country		8. This corporation has liability for i	ntangible tax	under	s 199.032,
	25	29	30			□No		
	9. Name and Address of Curre	nt Registered Agent		,	10. Name and Address of New R	egistered A	gent	
			81	Name				
MAGLICH, RICK G 82 Street					ddress (P.O. Box Number is Not Acceptable)			
	ORN CIRCLE		83					
SARASC)TA FL 34233		63				, ,	
			84	City		FL	85	Zip Code
2.	Signar are, types or proded name, of registered age. OF HCERS AN	ND DIRECTORS	NOTE Bugistered Age	of Saluature regions	ADDITIONS/CHANGES TO OFF			
ITLF	D	☐ DELETE	1.1111(F] Chang	e 🔲 Addition
AME	MAGLICH, RICK G		1.2 NAME					
TREET ADDRESS	4752 ACORN CIRCLE			I ADDRESS				
ITY - ST - ZIP	SARASOTA FL 34233		1.4 Cily -	SI · ZIF			Chang	e Addition
ΠE		□ pertie	2 1 THUE 22 NAME			_		
AME				* ADORESS				
TREET ADORESS			2 4 CITY -					
ITY-ST-ZIP ITLE		DELETE	3 1 1111] Chang	e 🔲 Addition
AME		_	3.2 NAME					
TREET ADDRESS			3.3 STRE	LADDRESS				
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IILE		☐ DECETE	4 17111			L	j Chang	je 🔲 Addition
AME			4.2 NAME					
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STREET ADDRESS			5.3 STPE					
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NAME STREET ADDRESS				EL ADDRESS				
CITY - ST - ZIP			64 CiTy					
OF LEGISTRE	L				for the convention state of its Continue 116	0.07/0/// Fla	data Ct	stides I further

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 report 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 chapter, or on an attachment with an address.

SIGNATURE:

r director of the corporation of the repetitor of trustee empowered to execute und lock 13 if changed, or on an attachment with an address.

Light and typed on printed name of signing officer on director

1-22-96 (941)-921-5973