

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra S. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 28 PM 2:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000037506 (1)**

1. Corporation Name
NOBIS REALTY INVESTMENTS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business 621 N COLLEGE AVE BLOOMINGTON IN 47404	Mailing Address 621 N COLLEGE AVE BLOOMINGTON IN 47404
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3. Date Incorporated or Qualified 05/25/1993	3a. Date of Last Report 04/27/1994
4. FEI Number 58-2063563	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under § 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. City 24. State	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. City 29. State
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8. Name and Address of Current Registered Agent

**CORPCO INC
2699 S BAYSHORE DR
7TH FLOOR
MIAMI FL 33133**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
83.	
84. City	

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	NAME NOBIS, ROLAND F	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 621 N COLLEGE AVE	CITY, ST, ZIP BLOOMINGTON IN 47404	2. NAME	
		3. STREET ADDRESS	
		4. CITY, ST, ZIP	
TITLE	NAME	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY, ST, ZIP	22. NAME	
		23. STREET ADDRESS	
		24. CITY, ST, ZIP	
TITLE	NAME	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY, ST, ZIP	32. NAME	
		33. STREET ADDRESS	
		34. CITY, ST, ZIP	
TITLE	NAME	41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY, ST, ZIP	42. NAME	
		43. STREET ADDRESS	
		44. CITY, ST, ZIP	
TITLE	NAME	51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY, ST, ZIP	52. NAME	
		53. STREET ADDRESS	
		54. CITY, ST, ZIP	
TITLE	NAME	61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY, ST, ZIP	62. NAME	
		63. STREET ADDRESS	
		64. CITY, ST, 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)(b), 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, as applicable, or on an attachment with an address.

SIGNATURE: *Roland F. Nobis, Pres* **4/17/95** **8123396339**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER, OR DIRECTOR