

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 32 PM 1:25

DOCUMENT # **P93000041953 (9)**

1. Corporation Name

G AND S REALTY, INC.

Principal Place of Business

**242 N WESTMONTE DR
S-102
ALTAMONTE SPRINGS FL 28714**

Mailing Address

**242 N WESTMONTE DR
S-102
ALTAMONTE SPRINGS FL 28714**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/04/1993

3a. Date of Last Report
08/08/1994

4. FEI Number
59-3196956

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 **921 Douglas Ave**

2a. Mailing Address

26 **← SAME**

Suite, Apt. #, etc

22 **Suite 206**

Suite, Apt. #, etc.

27

City & State

23 **Altamonte Springs, FL**

City & State

28

Zip

24 **32714**

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

~~BRINK, HOWARD
242 NORTH WESTMONTE DRIVE
ALTAMONTE SPRINGS FL 32714~~

10. Name and Address of New Registered Agent

81 Name **Gregory A. Boyd**

82 Street Address (P.O. Box Number is Not Acceptable)
921 Douglas Ave

83

84 City **Altamonte Springs** **FL** 85 Zip Code **32714**

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 *Gregory A. Boyd*

3-15-95

Signature: Type or printed name of registered agent and title if applicable

NOTE: Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **GIVENS, CHARLES R JR**
STREET ADDRESS **242 N WESTMONTE DR., #102**
CITY, ST, ZIP **ALTAMONTE SPRINGS FL 32714**

1.1 TITLE **VD** Change Addition
1.2 NAME **Gregory A. Boyd**
1.3 STREET ADDRESS **921 Douglas Ave**
1.4 CITY, ST, ZIP **Altamonte Springs, FL 32714**

TITLE **DV**
NAME **MONROE, MARK**
STREET ADDRESS **242 N. WESTMONTE DR**
CITY, ST, ZIP **ALTAMONTE SPRINGS FL**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

TITLE **DV**
NAME **BRINK, HOWARD**
STREET ADDRESS **242 N WESTMONTE DR., #102**
CITY, ST, ZIP **ALTAMONTE SPRINGS FL**

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

TITLE **VD**
NAME **HACKETT, SHANE**
STREET ADDRESS **242 N. WESTMONTE DR**
CITY, ST, ZIP **ALTAMONTE SPRINGS FL**

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 (2)(3)(a), 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, changed, or on an attachment with an address.

SIGNATURE: *Gregory A. Boyd*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-95 (407) 774-3400
Date District Number