FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

ANNUAL REPORT

1995

DOCUMENT # P93000063223 (0)

1. FLORIDA SOVEREIGN PROPERTIES, INC.

TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
~~700 W. STATE ROAD 436~~ ~~SUITE 2001~~ ~~ALTAMONTE SPRINGS FL 32714~~	~~330 W. STATE ROAD 436~~ ~~SUITE 2001~~ ~~ALTAMONTE SPRINGS FL 32714~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/09/1993
3a. Date of Last Report: 03/28/1994

2. Principal Place of Business	2a. Mailing Address
21 405 DOUGLAS AVE	26 PO BOX 917359
22 SUITE 1955	27
23 ALTAMONTE SPRGS FLA	28 LONGWOOD FLA
24 32714	25 USA 29 32791 30 USA

4. FEI Number: 59-3200211 ☐ 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 was liable for intangible tax under S. 199.032, Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

~~JACONETTI, GEORGE E~~
~~733 W. STATE RD. 436~~
~~SUITE 2001~~
~~ALTAMONTE SPRINGS FL 32714~~

10. Name and Address of New Registered Agent

81 Name: JUDGE WALTER E
82 Street Address (P.O. Box Number is Not Acceptable): 405 DOUGLAS AVE
83 SUITE 1955
84 City: ALTAMONTE SPRINGS FL 85 Zip Code: 32714

11. Pursuant to the provisions of Section 607.1005, 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. The 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 that position under Florida Statutes.

SIGNATURE: 4-28-95

12. OFFICER AND DIRECTORS:

PD
KAHN, JEROME B
2102 ROYAL FERN CT
LONGWOOD FL 32750

~~STDV~~
JACONETTI, GEORGE W
733 W. STSTE RD. 436 STE. 2001
ALTAMONTE SPRINGS FL 32714

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS:

STD ☒ Change ☐ Addition

V ☐ Change ☒ Addition
JUDGE, WALTER E
405 DOUGLAS AVE SUITE 1955
ALTAMONTE SPRINGS FLA 32714

14. I hereby certify that the information supplied with this report is complete, accurate and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 above, or on an attachment with an address.

SIGNATURE: 4-28-95 407-774-1600

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Telephone Number

0038760 CP