

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P93000070502 (8)

1. Corporation Name
PACT REAL ESTATE CORPORATION OF NC



Principal Place of Business
8340 AMERICAN WAY
GROVELAND FL 34736
US

Mailing Address
P.O. BOX 625
GROVELAND FL 34736-0625
US

3. Date Incorporated or Qualified 10/04/1993
3a. Date of Last Report 05/01/1996
4. FEI Number 59-3208161
5. Certificate of Status Desired [X] \$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. Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country
2a. Mailing Address
25. Suite, Apt. #, etc.
26. City & State
27. Zip
28. Country
29. Zip
30. Country

9. Name and Address of Current Registered Agent
FULMER, PHILIP R.
8000 CHERRY LAKE ROAD
GROVELAND FL 34736

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code FL

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS
TITLE, NAME, STREET ADDRESS, CITY, ST, ZIP
EVP FULMER, BARBARA B 8971 CHARLESTONPK ORLANDO FL
PRES TURNER, CYNTHIA F 137 HARTINGTON DR MADISON AL
SEC FULMER, PHILIP R 8000 CHERRY LAKE ROAD GROVELAND FL
VP FULMER, CARROLL A 14726 GORD NECK DROVE MONTEVERDE F
VP FULMER, TIMOTHY A 9239 WOODBREEZE BLVD. WINDERMERE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP, 2.1 TITLE, 2.2 NAME, 2.3 STREET ADDRESS, 2.4 CITY-ST-ZIP, 3.1 TITLE, 3.2 NAME, 3.3 STREET ADDRESS, 3.4 CITY-ST-ZIP, 4.1 TITLE, 4.2 NAME, 4.3 STREET ADDRESS, 4.4 CITY-ST-ZIP, 5.1 TITLE, 5.2 NAME, 5.3 STREET ADDRESS, 5.4 CITY-ST-ZIP, 6.1 TITLE, 6.2 NAME, 6.3 STREET ADDRESS, 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 recorder 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 changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)