FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 8:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000075438 (0)**

1. Corporation Name
UNITED PROPERTIES SOUTHEAST, INC.

Principal Place of Business	Mailing Address
6333 N. ORANGE BLOSSOM TRAIL SUITE 201 ORLANDO FL 32810	6333 N. ORANGE BLOSSOM TRAIL SUITE 201 ORLANDO FL 32810

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/01/1993
3a. Date of Last Report: 02/15/1994

2. Principal Place of Business
21 3033 Mercy Dr.
22 Suite, Apt. #, etc
23 City & State: Orlando, FL
24 Zip: 32808 25 County: Orange

2a. Mailing Address
26 3033 Mercy Dr.
27 Suite, Apt. #, etc
28 City & State: Orlando, FL
29 Zip: 32808 30 County: Orange

4. FEI Number: 59-3207486 ☐ 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

9. Name and Address of Current Registered Agent

EDGAR, CANDICE B
6333 N. ORANGE BLOSSOM TRAIL
SUITE 201
ORLANDO FL 32810

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 3033 Mercy Dr.
83
84 City: Orlando FL 85 Zip Code: 32808

11. Pursuant to the provisions of Sections 607.0502 and 607.1008, 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: (Signature of New Registered Agent, if changed) (Name of New Registered Agent, if changed) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 14	
TITLE	CPD	11 TITLE	☒ Change ☐ Addition
NAME	DOEBLER, DONALD W	12 NAME	
STREET ADDRESS	6333 N. ORANGE BLOSSOM TRAIL, STE. 201	13 STREET ADDRESS	3033 Mercy Dr.
CITY ST ZIP	ORLANDO FL	14 CITY ST ZIP	Orlando, FL 32808
TITLE	VD	21 TITLE	☒ Change ☐ Addition
NAME	DOEBLER, DAVID R	22 NAME	
STREET ADDRESS	6333 N. ORANGE BLOSSOM TRAIL, STE. 201	23 STREET ADDRESS	3033 Mercy Dr.
CITY ST ZIP	ORLANDO FL	24 CITY ST ZIP	Orlando, FL 32808
TITLE	VD	31 TITLE	☒ Change ☐ Addition
NAME	DOEBLER, VIRGINIA	32 NAME	
STREET ADDRESS	6333 N. ORANGE BLOSSOM TRAIL, STE. 201	33 STREET ADDRESS	3033 Mercy Dr.
CITY ST ZIP	ORLANDO FL	34 CITY ST ZIP	Orlando, FL 32808
TITLE	VSTD	41 TITLE	☒ Change ☐ Addition
NAME	EDGAR, CANDICE B	42 NAME	
STREET ADDRESS	6333 N. ORANGE BLOSSOM TRAIL, STE. 201	43 STREET ADDRESS	3033 Mercy Dr.
CITY ST ZIP	ORLANDO FL	44 CITY ST ZIP	Orlando, FL 32808
TITLE	VD	51 TITLE	☒ Change ☐ Addition
NAME	TULLY, LAURA	52 NAME	
STREET ADDRESS	6333 N. ORANGE BLOSSOM TRAIL, STE. 201	53 STREET ADDRESS	3033 Mercy Dr.
CITY ST ZIP	ORLANDO FL	54 CITY ST ZIP	Orlando, FL 32808
TITLE	VD	61 TITLE	☒ Change ☐ Addition
NAME	ECELBARGER, CRAIG V	62 NAME	
STREET ADDRESS	3411 N.W. 72ND AVE.	63 STREET ADDRESS	3033 Mercy Dr.
CITY ST ZIP	MIAMI FL	64 CITY ST ZIP	Orlando, FL 32808

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)(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 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 if changed, or on an attachment with an address.

SIGNATURE: [signature] VP 4-25-95 (407) 299-0441
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Candice B Edgar, Vice President

0069181 CP