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FILED

Feb 26 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 # P94000011964 (1)

1. Corporation Name  
PROPERTY GROUP, INC.

Principal Place of Business

390 N. ORANGE AVE.  
SUITE 1300  
ORLANDO FL 32801

Mailing Address

390 N. ORANGE AVE.  
SUITE 1300  
ORLANDO FL 32801-1641



2. Principal Place of Business

21 2260 SANTIAGO RD  
Suite, Apt. #, etc.

2a. Mailing Address

26 2260 SANTIAGO RD  
Suite, Apt. #, etc.

City & State

23 SANTA BARBARA CA.  
Zip

Country

25 U.S.A.

City & State

28 SANTA BARBARA CA.  
Zip

Country

29 93103 30 U.S.A.

9. Name and Address of Current Registered Agent

J. LINDSAY BUDLER, JR  
389 N. NEW YORK AVENUE  
WINTER PARK FL 32789

3. Date Incorporated or Qualified

02/14/1994

3a. Date of Last Report

08/12/1996

4. FEI Number

63-1111377

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE  
NAME ATHANASULEAS, CONSTANTINE L  
STREET ADDRESS 2124 CHRISTINA COVE  
CITY-ST-ZIP BIRMINGHAM AL 35244

TITLE D ☒ DELETE  
NAME ATHANASULEAS, CHRISTINA  
STREET ADDRESS 2124 CHRISTINA COVE  
CITY-ST-ZIP BIRMINGHAM AL 35244

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition  
1.2 NAME ROGER E. JOHNSON  
1.3 STREET ADDRESS 2260 SANTIAGO RD  
1.4 CITY-ST-ZIP SANTA BARBARA, CA. 93103

2.1 TITLE T.S. ☒ Change ☐ Addition  
2.2 NAME FRANCES J. JOHNSON  
2.3 STREET ADDRESS 2260 SANTIAGO RD  
2.4 CITY-ST-ZIP SANTA BARBARA, CA 93103

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

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

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 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 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 typed or printed name of signing officer or director

2-4-97 805-966-3343

Date

Daytime Phone #

CR2E034 (9/96)