

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

APPROVED
AND
FILED

55 MAY -1 AM 10:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **P94000014401 (1)**
1. Corporation Name
D.G. REAL ESTATE, INC.

Principal Place of Business
**1325 N ATLANTIC AVE 2nd FL
COCOA BEACH FL 32931**

Mailing Address
**1325 N ATLANTIC AVE 2nd FL
COCOA BEACH FL 32931**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/14/1994		3a. Date of Last Report	
4. FEI Number 59-2224405		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		2a. Mailing Address	
21 Suite, Apt. #, etc. Suite 2		26 Suite, Apt. #, etc. Suite 2	
22 City & State		27 City & State	
23 Zip Country		28 Zip Country	
24		30	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GALLOWAY, DAVID 1325 N ATLANTIC AVE 2nd FL COCOA BEACH FL 32931		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City FL 85 Zip Code	

I, 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 _____ DATE _____
Signature, typed or printed name of registered agent and title of corporation (NOTE: Registered Agent signature required when applicable)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE NAME STREET ADDRESS CITY, ST, ZIP D GALLOWAY, DAVID 1325 N ATLANTIC AVE 2nd FL COCOA BEACH FL 32931		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, ST, ZIP ☐ Change ☐ Addition	
		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, ST, ZIP ☐ Change ☐ Addition	
		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST, ZIP ☐ Change ☐ Addition	
		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, ST, ZIP ☐ Change ☐ Addition	
		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST, ZIP ☐ Change ☐ Addition	
		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY, ST, ZIP ☐ Change ☐ Addition	

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 110.07(3)(b), 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: **David L. Galloway** **4/18/95** **407-784-3000**
Signature and typed or printed name of signing officer or director