

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

APPROVED AND FILED

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Munson
Secretary of State
Division of Corporations

DOCUMENT # P94000059568 (3)

**1. Corporate Name:
REAL ESTATE HOLDINGS, INC.**

DO NOT WRITE IN THIS SPACE

**Principal Place of Business: 555 ESTATES PLACE
LONGWOOD FL 32779**

**Mailng Address: 555 ESTATES PLACE
LONGWOOD FL 32779**

3. Date Period Covered in Report: 08/10/1994

21. Principal Place of Business: 773 DOUGLAS AVENUE

26. Mailing Address: 773 DOUGLAS AVENUE

4. FID Number: 59-3273902

22. City & State: ALTAMONTE SPRINGS, FL

27. City & State: ALTAMONTE SPRINGS, FL

5. Certificate of State Document: \$8.75 Additional Fee Required

24. Zip Code: 32714

6. Election Campaign Financing: \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TRICKER, DAVID W
555 ESTATES PLACE
LONGWOOD FL 32779**

81. Name: CHARLOTTE E. NANFELT
82. Street Address of U.S. Post Office: 585 ESTATES PLACE
83.
84. City: LONGWOOD FL 85. Zip Code: 32779

11. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.

SIGNATURE: Charlotte E. Nanfelt

12. OFFICERS AND DIRECTORS	
President	
Vice President	CHARLOTTE E. NANFELT
Secretary	
Treasurer	
Director	
Director	
Director	
Director	
Director	
Director	
Director	
Director	
Director	
Director	
Director	
Director	
Director	
Director	
Director	

13. ADDITIONAL INFORMATION CONCERNING OFFICERS AND DIRECTORS	
Name	
Address	
City	
State	
Zip Code	
Position	
Term of Office	
Signature	
Date	
Signature	
Date	
Signature	
Date	
Signature	
Date	
Signature	
Date	
Signature	
Date	
Signature	
Date	

14. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida.

SIGNATURE: [Handwritten Signature]

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 407-786 0000