

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 FEB 28 AM 6:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000061771 (9)

1. Corporation Name

FIRST CAPITAL REALTY MANAGEMENT, INC.

Principal Place of Business

3802 EHRlich RD.
SUITE 210
TAMPA FL 33614

Mailing Address
8001 N. Dale Mabry - Suite 701B
3802 EHRlich RD.
SUITE 210
TAMPA FL 33614

900001419419
-03/02/95--01063--002
*****208.75 *****208.75
DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
08/18/1994

3a. Date of Last Report

4. FEI Number

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

21 8001 N. Dale Mabry

2a. Mailing Address

26 8001 N. Dale Mabry

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 701 B

27 701 B

City & State

City & State

23 Tampa, FL

28 Tampa, FL

Zip

Country

Zip

Country

24 33614

25 USA

29 33614

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PHILLIPS, GEORGE W
3802 EHRlich RD.
SUITE 210
TAMPA FL 33614

81 Name

W. Joseph Wegman

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

8001 N. Dale Mabry, Suite 701B

83

84 City

Tampa

FL

85 Zip Code

33614

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 607.0503, Florida Statutes.

SIGNATURE

W. Joseph Wegman

(NOTE: Registered Agent signature required when registering)

DATE

2-14-95

12. OFFICERS AND DIRECTORS

TITLE DX
NAME PHILLIPS, GEORGE W
STREET ADDRESS 3802 EHRlich RD, SUITE 210 XX
CITY-ST-ZIP TAMPA FL 33614 X

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D ☐ Change ☒ Addition

1.2 NAME W. Joseph Wegman

1.3 STREET ADDRESS 8001 N. Dale Mabry, Suite 701B

1.4 CITY-ST-ZIP Tampa, FL 33614

2.1 TITLE VP ☐ Change ☒ Addition

2.2 NAME Joseph Romano

2.3 STREET ADDRESS 8001 N. Dale Mabry, Suite 701B

2.4 CITY-ST-ZIP Tampa, FL 33614

3.1 TITLE S/T ☐ Change ☒ Addition

3.2 NAME Karen Nales

3.3 STREET ADDRESS 8001 N. Dale Mabry, Suite 701B

3.4 CITY-ST-ZIP Tampa, FL 33614

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 is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(k), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

W. Joseph Wegman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W. Joseph Wegman

Feb. 14
January

1995 813-933-7418