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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

P94000070297 (4)

COPELAND REAL ESTATE, INC.

Principal Place of Business Mailing Address 707 S.E. THIRD AVE. 707 S.E. THIRD AVE.										
SUITE 101		SUITE 101	10040							
FT. LAUDERDALE FL 33316		FI. LAUDENDALE FL 3	FT. LAUDERDALE FL 33316		3. Date Incorporated or Qualified 09/22/1994	d 3a. Date of Last Report 02/14/1995				
2. Principal Pla 21	de of Business	2a. Mailing Address 26	_			4. FEI Number 65-0540914		├ ─	Applied For Not Applicable	
Suite, Apt #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		•	5 Additional Required	
City & State 23		City & State				6. Election Campaign Financing Trust Fund Contribution			May Be d to Fees	
Ζφ 24]	Country 25	Ζιρ 29	Country 30			8. This corporation has liability for Florida Statutes	or intangible ta es 🔲 No	ix under s	199.032,	
	9. Name and Address of Curre	nt Registered Agent		T		10. Name and Address of New	Registered	Agent		
CHAMBL	ISS, LINDA		81		ame	(D.O. Go. Al. arkadia Alah Accepta	labla)			
707 S.E.	THIRD AVE.		82	Si	treet Addre	ess (P.O. Box Number is Not Accept	.abiej			
SUITE 10			83							
FI. LAUL	DERDALE FL 33316		84	С	ity		FL	85 Z	p Code	
or registere	ed agent, or both, in the State of Flor n, and accept the obligations of, Sec superse, blestern did than in the procedup.	ida Suct change was authoriz shon 607.0505, Florida Statutes	ed by the corp	orat	on's board	ation submits this statement for the p d of directors. Thereby accept the ap thereby accept the ap ADDITIONS/CHANGES TO O	opdintment as	registered	dagent Fam	
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NAME	JACKSON, WILLIAM	MAV	1.2 NAME							
SPEED ADDRESS	6251 A NORTH DIXIE HIGH FT LAUDERDALE FL	WAT	13STHEFT							
CHY-ST-ZIF THUE	p DOUCHOALE IL		2 1 TITLE	i - ZII				Change	Addit-on	
NAME	DISQUE, PHILIP A		2.2 NAME							
SERRET ACURESS	707 SE 3RD AVE STE 400		2 3 STREET	ADD	RESS				>	
Clv St ZP	FT LAUDERDALE FL		24 CITY - S						1	
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NAME			3.2 NAME							
STREET ADDRESS			33 STREFT	T ADE	PRESS					
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D'st		□ DELETE	4 1 THEF				l	Change	Addition	
NAME Chicon Activities			4.2 NAME	400	2500					
STHEF" ADJUNESS			4.3 STREFT							
Cifn St Ze Trilf		[] DELEIE	4 4 CITY S 5 * TITLE	- ZII]	Change	Addition	
NA56			5.2 NAME				,			
STREET AUGRESS			5.3 STREET	ADD	RESS					
Citri-Si-2F			5.4 CITY - S							
Titt	The second of th	☐ DELETE	6 1 1016					Change	Addition	
NAM5			6.2 NAME							
STREET ADDRESS			6.3 STREET	ADD	RESS					
C 1 r - S ! Z/P			64 CITY - S							
certify that oath; that I	the information indicated on this ann	ical report or supplemental anni oration or the receiver or truste	ual report is tru e empowered l	ie ai	nd accúrati	or the exemption stated in Section 1 te and that my signature shall have th s report as required by Chapter 607,	ne same legal	effect as it	f made under	

SIGNATURE:

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-524-1401