

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 05 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 # P94000084931 (2)

1. Corporation Name

REALTY AND MORTGAGE SERVICES, INC.

Principal Place of Business

3743 SO ATLANTIC AVE
DAYTONA BEACH SHORES FL 32127

Mailing Address

3743 SO ATLANTIC AVE
DAYTONA BEACH SHORES FL 32127-5256



2. Principal Place of Business

21 912-D SOUTH RIDGEWOOD AVE

Suite, Apt. #, etc.

22 City & State

23 DAYTONA BEACH, FL

Zip

24 32114

Country

25 USA

2a. Mailing Address

26 912-D SOUTH RIDGEWOOD AVE

Suite, Apt. #, etc.

27 City & State

28 DAYTONA BEACH, FLORIDA

Zip

29 32114

Country

30 USA

3. Date Incorporated or Qualified

11/17/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3284282

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

9. Name and Address of Current Registered Agent

ADKINS, GARY L
3743-5A SOUTH ATLANTIC AVE.
DAYTONA BEACH SHORES FL 32127

10. Name and Address of New Registered Agent

81 Name

HEWITT J DUPONT CPA

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

912-D SOUTH RIDGEWOOD AVE

83

84 City

DAYTONA BEACH

85 FL

Zip Code

32114

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Hewitt J. Dupont

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	DUPONT, HEWITT J	912-D SOUTH RIDGEWOOD AVE	DAYTONA BEACH FL 32114	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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:

Hewitt J. Dupont
HEWITT J. DUPONT

4-28-97 (904) 257-2425

Date

Daytime Phone #

0023453

CR2E034 (9/96)