

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000003095 (3)

1. Corporation Name

REALTY SERVICES OF SOUTH COUNTY, INC.

Principal Place of Business

8588 US HWY 3015
RIVERVIEW FL 33568
US

Mailing Address

P O BOX 1010
RIVERVIEW FL 33568-1010
US

FILED
May 07 1997 8:00am
Secretary of State



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

GARDINER, ROBERT B
~~102 E. NORTH BRANCH RD.~~
~~RUSKIN FL 33570~~

11224 VILLAS ON THE GREEN BLVD.
RIVERVIEW, FL. 33569

3. Date Incorporated or Qualified

01/10/1995

3a. Date of Last Report

06/19/1996

4. FEI Number

65-0548396

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

Robert B. Gardiner R.G.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-instating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PT ☒ DELETE

NAME GARDINER, ROBERT B
STREET ADDRESS 102 E NO BRANCH RD
CITY-ST-ZIP RUSKIN FL

TITLE VPS ☒ DELETE

NAME PREVOST, LORRAINE T
STREET ADDRESS 102 E NO BRANCH RD
CITY-ST-ZIP RUSKIN FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PT ☒ Change ☐ Addition

1.2 NAME GARDINER, ROBERT B
1.3 STREET ADDRESS 11224 VILLAS ON THE GREEN
1.4 CITY-ST-ZIP RIVERVIEW FL 33569

2.1 TITLE VPS ☒ Change ☐ Addition

2.2 NAME PREVOST, LORRAINE T.
2.3 STREET ADDRESS 11224 VILLAS ON THE GREEN
2.4 CITY-ST-ZIP RIVERVIEW, FL 33569

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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 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

Robert B. Gardiner

May 13 1997

CR2E034 (9/96)