

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

FILED

Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000011338 (7)**

1. Corporation Name

CONSORTIUM REALTY SERVICES, INC.

Principal Place of Business

**154 PARK AVE. SOUTH
WINTER PARK FL 32789**

Mailing Address

**154 PARK AVE. SOUTH
WINTER PARK FL 32789-4315**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/09/1995	3a. Date of Last Report 05/01/1996
21. 180 S. Knowles Ave	26. 180 S. Knowles	4. FEI Number 59-3295803		Applied For Not Applicable	
22. Suite 3	27. Suite 3	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Winter Park FL	28. Winter Park FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. 32789	25. Country	29. 32789		30. Country	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**COLLISON, HARRY W JR.
154 PARK AVE SOUTH
WINTER PARK FL 32789**

81. Name

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

83. Suite

84. City

85. Zip Code

I, **HARRY W JR. COLLISON**, Secretary of State, do hereby certify that 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLLISON, HARRY W JR.	1.2 NAME	
STREET ADDRESS	154 PARK AVE. SOUTH	1.3 STREET ADDRESS	180 S. Knowles Ave
CITY - ST - ZIP	WINTER PARK FL 32789	1.4 CITY - ST - ZIP	Winter Park FL 32789
TITLE	D	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOOD, PHILIP F	2.2 NAME	
STREET ADDRESS	154 PARK AVE SOUTH	2.3 STREET ADDRESS	180 S. Knowles Ave
CITY - ST - ZIP	WINTER PARK FL 32789	2.4 CITY - ST - ZIP	Winter Park FL 32789
TITLE	PVD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREEN, MICHAEL L	3.2 NAME	
STREET ADDRESS	154 PARK AVE SOUTH	3.3 STREET ADDRESS	180 S. Knowles Ave
CITY - ST - ZIP	WINTER PARK FL 32789	3.4 CITY - ST - ZIP	Winter Park FL 32789
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0073996

CR2E034 (9/96)