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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 04 1997 8:00am

Secretary of State

- 1 (CRICAL III CITTO CITTO CENTE CONTROL CONTROL CONTROL CONTROL CONTROL CONTROL CONTROL CONTROL CONTROL CONT

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000023925 (7)

SOUTHERN REALTY OF N.E. FLORIDA, INC.

								<del></del> .		4				I BIII IIII		
Principal Place of Business Mailing Address											1 SAMBILANDI ISA ANIMI MILISI MAL					UNI AVEL
3202 SAWGRASS VILLAGE CIRCLE 3202 SAWGRASS VILLA PONTE VEDRA BEACH FL 32082 PONTE VEDRA BEACH																
										3.	Date Incorporated or C	ualified	3a. D	ate of Las	st Re	port
											03/23/1995		05/	01/199	6	
2.	Principal Pl	lace of Busi	ness		2a. Mailing Address					4.	FEI Number					olled For
21				2	6						59-3306055				Not	Applicable
Suite, Apt. #, etc.				2	Suite, Apt. #, etc.					5.	Certificate of Status De	sired			-	dditional quired
	City & State			City & State				6.	Election Campaign Fina	ancing		\$5.0	00	viay Be		
23				28					Trust Fund Contribution	1				Fees		
	Zip		Country	<u> </u>	Zip		Country			8.	This corporation has lie	bility for	intangible	tax unde	ers.	199.032,
24			25	2		30				<u> </u>	Florida Statutes			□ No		
_		9. Name	and Address o	Current Re	gistered Agent					10.	Name and Address of	New Re	gistered	Agent		
	GRE	EN, SUZA	NNE W				81	ŀ	Name							
3010 S. 3RD ST.									Street Addre	eet Address (P.O. Box Number is Not Acceptable)						
SUITE A JACKSONVILLE FL 32250							83		····		***************************************					
	Ų. 1 <b>.</b>						84	-	City	<b></b>	**************************************		<b>E</b> 1	85 2	ip C	ode
				007.0000	1007 4500 51-22-5	St		L,					FL	-		
i		egistered ag rn familiar w	gent, or both, in t ith, and accept t	he State of FI he obligations	orida. Such change s s of, Section 607.050	was autho	orized by Statutes	∌-rı ≀ th 3.	ne corporatio	on's b	n submits this statemen poard of directors. I here	by acce	pt the app	oointment	g its as r	egistered
S	GNATURE	Stgnature, types	to printed name of reg	pistened agent and	tile it applicable.	(NOTE Reg	islered Age	nt s	signature require	d when	reinstating)		DATE	<del></del>		
12	2.		OFFIC	ERS AND DIE			13.			F	ADDITIONS/CHANGES	TO OFFIC	CERS AND	DIRECT	ORS	S IN 12
Til	'LE	DP			☐ DELET	E	1.1 TOLE		ļ					Chan	ge	Addition
No	ME		d, thomas				1.2 NAME		l							
ST	REET ADDRESS		wgrass villi				1.3 STREET	AD	DRESS							
C)	TY-ST-ZIP	PONTE \	ÆDRA BEACH	FL 32082			1.4 CITY - S	7-2	ŽIP							
711	`LF	DVP			DELETE		2.1 TITLE							☐ Chan	ge	Addition
N.A	ME	ANTZAKLIS, BETH			2		2.2 NAME									
ST	REET ADDRESS	3202 SA	wgrass vill	AGE CIRCLE			2.3 STREET	ADI	DRESS							
CU	TY - ST - ZIP	PONTE \	/EDRA BEACH	FL 32082			2. 4 CITY-5	ST - 3	ZIP							:
TIT	T.F	DST			DELET	Ē T	3.1 TITLE							Chan	ge	Addition
N.ª	ME	WALCH,	PETER A				3.2 NAME									
ST	REET ADDRESS	3202 SA	wgrass vill	AGE CIRCLE	•		3.3 STREET	AD	DRESS							
CC	TY-ST-ZIP	PONTE \	/EDRA BEACH	FL 32082			3.4. CITY - 5	31-	ZIP							
ווד	'LE				☐ DELET	E	4.1 TITLE							Chan	ge	Addition
N	ME						4. 2 NAME									
ST	HEET ADDRESS						4.3 STREET	AD	DRESS							
	TY-ST-7IP						4.4 CITY-S									
	Ų.F			<del>****</del>	DELET		5.1 TITLE				······································			Chan	ge	Addition
N.4	ME						5.2 NAME									
	REET ADDRESS						5 3 STREET	AD	DRESS							
	TY - ST - ZIP						5.4 CITY-S									
	LE				DELET		6.1 TITLE							☐ Chan	ge	Addition
	ME					1	6.2 NAME								-	
	REET ADDRESS					1	6.3 STREET	A.D.	naree							
	BELL MOUNT 33					1	u.a oincei	nu	TUTEON							

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