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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000048104 (0)

DOCUMENT # Corporation Name SHULER & SHULER REAL ESTATE AUCTIONEERS, INC. Principal Place of Business Mailing Address 420 JULIA ST 428 JULIA ST TITUSVILLE FL 32796-3522 TITUSVILLE FL 32796-3522 3. Date Incorporated or Qualified 3a. Date of Last Report 06/16/1995 2. Principal Piace of Business 2a. Mailing Address 4. EELNumber Applied For 21 26 Not Applicable Suite Act # etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zıp Country 8. This corporation has liability for intangible tax under s. 199,032 24 25 30 29 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SHULER, DEBRA 82 Street Address (P.O. Box Number is Not Acceptable) 428 JULIA ST TITUSVILLE FL 32796-3522 83 84 City Zip Code 85 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. Larn larner with, and accept the obligations of, Section 607.0505, Florida Statutes. SIĞNATURE Signature type I be protection and tropological age of an ithin mapped as 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ñ TITLE DELFTE 1.1006 ☐ Change Addition SHULER, DEBRA NAME 1.2 NAME STREET ADDRESS 422 JULIA ST 1.3 STREET ADDRESS TITUSVILLE FL 32796-3522 CITY-S1-ZIP 1.4 CiTY - ST - ZIP TITLE DELETE 2 1 TITLE Addition HADDAD, MICHAEL NAME 2.2 NAME 2825 S WASHINGTON AVE STREET ADDRESS 2.3 STREET ADORESS TITUSVILLE FL 32781-0096 Cify-ST-ZiP 2.4 CITY - ST - ZIP TITLE DELETE 3 1 Title Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 34 011Y-ST Z.P TITLE DELETE 4 1 TITLE ☐ Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY - ST - ZIP TITLE DELFTE 5 1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 54 CITY ST ZiP THILE DELETE 6 1 TILLE Addition 70000184912 -06/04/96--01016--026 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS \*\*\*200.00 CHTY - ST - ZIF

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.0/(3)(k), Florida Statutes. I further certify that the information indicated on this armust 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 13 if changed, or on an attachment with an address.

6.4 CHY-ST-ZIP

SIGNATURE:

IGNING OFFICER OR DIRECTOR

407-267-8563

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