

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

FILED
May 13 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 # P95000070407 (8)

1. Corporation Name
REAGIN REALTY GROUP, INC.

Principal Place of Business
1230 MYRTLE AVENUE SOUTH
CLEARWATER FL 34616

Mailing Address
1230 MYRTLE AVENUE SOUTH
CLEARWATER FL 34616-3463



3. Date Incorporated or Qualified 09/12/1995
3a. Date of Last Report 07/16/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-3339353	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28		
Zip	Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No
24	29		
Country	Country		
25	30		

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 607.0402 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 _____
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	Change Addition
NAME	REAGIN, ROBERT	1.2 NAME	
STREET ADDRESS	1230 MYRTLE AVENUE SOUTH	1.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34616	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	Change Addition
NAME	REAGIN, J. ROBERT	2.2 NAME	
STREET ADDRESS	1230 MYRTLE AVENUE SOUTH	2.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34616	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	Change Addition
NAME	SAVOIE, TEMPI	3.2 NAME	
STREET ADDRESS	1230 MYRTLE AVENUE SOUTH	3.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34616	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change 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: *Tempi Savoie* Tempi Savoie, Sec/Treas 4/28/97 (813) 449-0905

CR2E034 (9/96)