

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000083536 (9)

1. Corporation Name

SOUTHERN LIFESTYLE REALTY, INC.



Principal Place of Business

9471 BAYMEADOWS ROAD
SUITE 403
JACKSONVILLE FL 32256

Mailing Address

9471 BAYMEADOWS ROAD
SUITE 403
JACKSONVILLE FL 32256

3. Date Incorporated or Qualified

10/31/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 34 Industrial Loop N.

26 34 Industrial Loop N

4. FEI Number

59-3343109

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

23 City & State

28 City & State

6. Election Campaign Financing
Trust Fund Contribution

□

\$5.00 May Be
Added to Fees

24 Zip

25 Country

29 Zip

30 Country

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

□ Yes □ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ANDERSON, RUSS
9471 BAYMEADOWS ROAD
SUITE 403
JACKSONVILLE FL 32256

81 Name

Gary D. Silverfield

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

1865 Southside Blvd

83

84 City

Jacksonville

FL

85 Zip Code

32256

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

Gary D. Silverfield

(NOTE: Registered Agent signature required when reinstating)

2/22/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ATKERSON, CHARLES F JR
9471 BAYMEADOWS ROAD STE 403
JACKSONVILLE FL 32256

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SILVERFIELD, GARY D
9471 BAYMEADOWS ROAD STE 403
JACKSONVILLE FL 32256

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President
Schoeff, Sarah E.
34 Industrial Loop N.
Suite 195
Orange Park, FL 32073

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETED

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETED

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETED

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
Vice President
Schoeff, Sarah E. (Beth)
34 Industrial Loop, N. Ste. 195
Orange Park, FL 32073
Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
Change Addition

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 119.07(3)(k), 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:

Sarah E. Schoeff

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/96 (904) 278-5555

CR2E034 (12/95)