SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000095082 (0)

CENTRAL FLORIDA REALTY GROUP, INC.

FILED Sep 25 1997 8:00am Secretary of State



Mailing Address Principal Place of Business 152 MORNING GLORY DR. 152 MORNING GLORY DR. LAKE MARY FL 32746 LAKE MARY FL 32746 DO NOT WRITE IN THIS SPACE 3a. Date of Last Report 3. Date Incorporated or Qualified 12/13/1995 11/20/1996 2. Principal Place of Business Mailing Address Applied For 21 26 59-3408130 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 П 28 Trust Fund Contribution Added to Fees Country Zip Country Ζıρ 8. This corporation owes or has paid the current year Intangible Yes 24 ☐ No 25 Personal Property Tax due June 30. 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FALSTAD, DIANE H 152 MORNING GLORY DR. 82 Street Address (P.O. Box Number is Not Acceptable) LAKE MARY FL 32746 83 84 City 85 Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (4/97 DELETE Change Addition TITLE 11700 FALSTAD, DIANE H 1.2 NAME 1.3 STREET ADDRESS LAKE MARY FL 32746 1.4 CHTY-ST-ZIP CITY-S1-ZIP Addition DELETE Change 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2: 4 CITY - ST - ZIP CITY-ST-ZIP Addition ☐ DELETÉ Change 3.1 TIME TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELFTE TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Noitibba | | DELETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY-S1-2IP CITY-ST-ZIP Change DELETE 6.1 TITLE TITLE 500002304255 -09/26/97--01002--035 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS ***750.00 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Soction 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 eath; 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.

J. W 18 1097 (407) 323-3553