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

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City & State

Zip

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997

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NAME

STREET ADDRESS

City & State

Zip



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000095751 (0)

SUMMERLAND REALTY, INC.

Principal Place of Business Mailing Address 5401 KIRKMAN RD., STE. 725 **\$401 KIRKMAN RD., STE. 725** ORLANDO FL 32819-7912 ORLANDO FL 32819 3a. Date of Last Report 3. Date Incorporated or Qualified 12/14/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3365652 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired

9. Name and Address of Current Registered Agent KHATIB, RASHID A 5401 KIRKMAN RD., STE. 725 **ORLANDO FL 32819** 

Country

		6.	Election Campaign Financing Trust Fund Contribution			5.00 May Be dded to Fees
ountry		8.	This corporation has liability for Florida Statutes	intangible i Yes	tax ur ] No	nder s. 199.032,
10. Name and Address of New Registered Agent						
81	Name					
82	Street Address	s (I	O. Box Number is Not Accepta	ble)	<del></del>	
83						
84	City				85	Zip Code

**FILED** 

May 02 1997 8:00am

Secretary of State

04/10/1996

Applied For

\$8.75 Additional

Fee Required

Not Applicable

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.

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SIGNATURE Signature, typed or printed name of registered agent and title it appricable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change \_\_\_ Addition ■ DELETE 1.1111116 TITLE NAME KHOURI, ZAHI W 1.2 NAME 5401 KIRKMAN RD., STE. 725 1.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **ORLANDO FL 32819** 14 CiTY-ST-ZIP Addit/on DELFTE Change TITLE 21 TITLE 22 NAME NAME KHATIB, RASHID A 5401 KIRKMAN RD., STE. 725 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32819 2 4 CHY-ST-ZIP Addition DELETE TITLE 3.1 TITLE NAME JAMMAL, S.E. 3.2 NAME STREET ADDRESS 5401 KIRKMAN RD., STE. 725 3.3 STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32819 3.4 CITY-ST-ZIP Change Addition 4.1 TO LE

DELETE TITLE 4 2 NAME NAME WINTERS, DAVID STREET ADDRESS 5401 KIRKMAN RD., STE. 725 4.3 STREET ADDRESS City-St-ZiP ORLANDO FL 32819 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-7IP CITY-ST-ZIP DELETE ☐ Change Addition 6 1 TITLE TITLE

CITY-ST-ZIP 6.4 CHY-S1-7IP 14. I do hereby certify that the information supplied with this fring 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 all schment with an address.

G 2 NAME

6.3 STHEFT ADDRESS

Draws A VILOTIA WANDY MAY 200