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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 15 1997 8:00am Secretary of State

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DOCUMENT #	P96000002354 (4)	}
ARA REALTY SERVI	CES, INC.	
		{
Principal Place of Business	Mailing Address	\dashv
103 COUNTRYSIDE DRIVE	103 COUNTRYSIDE DRIVE	1

LONGHOOD FI	Latira	LONGWOOD IC SETTOO	LV					
					3. Date Incorporated or Qualifi	ed 3a. D	ate of Last Re	eport
}					01/05/1996	Ì	_	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
26 f.o. Box 91			5594	,			No	t Applicable
Suite, Apt. # etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	П	\$8.75	Additional
[22]					5. Certificate of Status Desired		Fee Re	quired
City & Stat	е	City & State		~ .	6. Election Campaign Financin	9	\$5.00	May Be
23		28 LONGWOOD		FL	Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip		intry	8. This corporation has liability			199.032
24	25	29 32791-5596	30	USA	Florida Statutes	Yes		
	9. Name and Address of Curre	nt Registered Agent		ļ <u>.</u>	10. Name and Address of Nev	/ Registered	Agent	
MAF	RDER, MICHAEL E			81 Name	ILBERT R. AUGER,	TA		1
	WEST CENTRAL BLVD.			82 Street Add	dress (P.O. Box Number is Not Acce	otable)		
	TE 1100				COUNTRY SIDE DA.	piacio		
	ANDO FL 32801			83				
011	ANDO I E BEBOT			101			Tar 1 77:- 7	
Í				84 City Le	DN410000	FL	85 Zip (779
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu	tes, the a	bove-named co	rporation submits this statement for t	he purpose o	of changing its	s registered
office or r	reg stered agent, or both, in the State	e of Florida, Such change was	authorize	d by the corpora	ation's board of directors. I hereby a	ccept the ap	pointment as	registered
· -	am famili al Milly and accept the oblig					//	100	1
SIGNATURE	Signal Rivers and of secured and segettered an	pent and fille it applicable (NO	TE Registere	d Agent signature req	USA Je. Din.	QATE.	-/7 P	
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO O	FFICERS AN	D DIRECTOR	S IN 12
TIFLE	D	DELETE	1.1 T	ITLE			Change	Addition
NAME	AUGER, ALBERT R JR.		1.2 N	AME				
STREET ADDRESS	103 COUNTRYSIDE DRIVE		135	TREET ADDRESS				1
City-St-ZIP	LONGWOOD FL 32779		1	ITY-ST-ZIP				}
TITLE	D	DELETE	217				Change	Addition
NAME	AUGER, LORI J	parent .	228				- •	_ {
STREET ADDRESS	103 COUNTRYSIDE DRIVE			TREET ADDRESS				1
1	LONGWOOD FL 32779		1	ì				\
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!			•	TREET ADDRESS				ļ
STREET ADDRESS			- 1					1
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15 TL€		☐ DELETE	511	life			Change	Addition
NAME			5.2 N	AME				
STREET ADDRESS	Į.		538	TREET ADDRESS				
CITY-ST-ZIP		.,	540	HTY-ST-ZIP				
TITLE		DELETE	6.1 7	IÌTE			Change	Addition
NAME	}		621	IAME				}
STREET ADDRESS			6.3 9	TREET ADDRESS				ľ
CITY-ST-ZIP				ITY-SI-ZIP				
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4. 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 it purget, or on an attachment with an address.

SIGNATURE

ALBERT R. Auger JR. Dir

1/6/97 407-114-0115