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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000014979 (4)

PATRICIAN REALTY CORPORATION

## FILED May 07 1997 8:00am Secretary of State



Principal Place of Business Mailing Address						
9032 HUNTINGTON PT. DRIVE	-	9032 HUNTINGTON PT. DRIVE				
SARASOTA FL 34238	SARASOTA FL 34238-3208					
				3. Date Incorporated or Qualified 02/14/1996	3a. Date of	Last Report
2. Principal Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	<u> </u>	Applied For
21	26				Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27			5. Certificate of Status Desired	1 1 7 7	.75 Additional ee Required
City & State	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country	Zip	Coun	lry	8. This corporation has liability for i	ntangible tax u	nder s. 199.032,
24 25	29	30			Yes □ No	
9. Name and Address of Curre	nt Registered Agent	— <u>-</u>	54	10. Name and Address of New Re	gistered Agent	
CONERBY, MURRAY E JR.		1	Name			
9032 HUNTINGTON PT. DRIVE		82 Street		fress (P.O. Box Number is Not Acceptab	le)	
SARASOTA FL 34238		18	33			·····
		ا ا	34 City		loc.	Zip Code
			City		FL 85	Zip Code
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the oblig SIGNATURE  Signature, typed or protect name of registered at 12.  OFFICERS AT		t Registered		ried when rejusting)  ADDITIONS/CHANGES TO OFFIC	DATE	
TITLE D	DELETE	13.	, ———	ADDITIONS/CHANGES TO OFFIC		hange Addition
NAME CONERBY, MURRAY E JR.		1.1 THL 1.2 NAM	1		□ 6	nange [_] Addition
STREET ADDRESS 9032 HUNTINGTON PT. DRIVI	Ę		EET ADDRESS			
CITY-ST-ZIP SARASOTA FL 34238	•		7-\$1-21P			
TITLE D	DELETE	2 1 1111			□ C	hange
NAME CONERBY, PATRICIA L		2 2 NAM	AE .			
STREET ADDRESS 9032 HUNTINGTON PT. DRIVI	<b>E</b>	2 3 SIR	EET ADDRESS			
CITY-ST-ZIP SARASOTA FL 34238		2 4 CIT	Y-ST-ZIP			
TITLE	DELETE	3,1 111,	F		· 🗆 c	hange
NAME		3.2 NAN	AE .			
STREET ADDRESS		3 3 STR	EFT ADDRESS			
CITY-ST-ZIP	T DELETE		Y - S1 - ZIP			FT 1330
TITLE	DELETE	4.1 7111	1		□ 0	hange L_ Addition
NAME PIRET ADDRESS		4. 2 NA1				
STREET ADDRESS CITY, ST. 789		1	EF1 ADDRESS			
CITY-ST-ZIP TITLE	DELETE	5.1 Till	(-\$1-ZIP		□ C	hange
NAME		5.2 NAM	1		J	94
STREET ADDRESS			EL LADDRESS			
CITY-ST-2IP			(-S1-7IP			
TITLE	DELETE	61 TITL			C	hange
NAME		6.2 NAN	-			3
STREET ADDRESS		1	LET AUDRESS			
CITY-ST-ZIP			7-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 eath; that I am an officer or director of the proporation 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 12 if changed, or on an attachment with an address and the control of the proporation of the propor

CICALATURE.