

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

FILED

Jun 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000064406 (7)

1. Corporation Name

MELROSE REAL ESTATE INVESTMENT TRUST, INC. -1996

Principal Place of Business

7077 BONNEVAL ROAD
SUITE 600
JACKSONVILLE FL 32216

Mailing Address

7077 BONNEVAL ROAD
SUITE 450
JACKSONVILLE FL 32216-6055



2. Principal Place of Business

21 Suite, Apt. #, etc. 600

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc. 600

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

08/01/1996

3a. Date of Last Report

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

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

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

F&L CORP.
200 LAURA STREET
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition
1.2 NAME BUCKLEY, RONALD F.
1.3 STREET ADDRESS 7077 BONNEVAL RD. SUITE 600
1.4 CITY-ST-ZIP JACKSONVILLE, FL 32216

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME VAN MOOK, A.L. "TON"
2.3 STREET ADDRESS 7077 BONNEVAL RD. SUITE 600
2.4 CITY-ST-ZIP JACKSONVILLE, FL 32216

3.1 TITLE VST ☐ Change ☒ Addition
3.2 NAME GARRIPEE, LESTER N.
3.3 STREET ADDRESS 7077 BONNEVAL RD. SUITE 600
3.4 CITY-ST-ZIP JACKSONVILLE, FL 32216

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

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME 100002197751
5.3 STREET ADDRESS -06/02/97--01079--008
5.4 CITY-ST-ZIP ***990.00

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

SIGNATURE OF LESTER N. GARRIPEE 3/2/97 604-286-1270

CR2E034 (9/96)