

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

APPROVED
AND
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1997 MAY 28 PM 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P960000 75623

1. Corporation Name

BROKERS REALTY INC.

Principal Place of Business

Mailing Address

5051 CASTELLO DR #2
NAPLES, FL 34103

3. Date Incorporated or Qualified

3a. Date of Last Report

NOV 4, 1996

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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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GLENN R. REITZ
5051 CASTELLO DR #2
NAPLES, FL 34103

81 Name

JAMES A. ZILLIGEN

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

5051 CASTELLO DR. #2

83

84 City

NAPLES

FL

85 Zip Code

34103

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

4.18.97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRES
NAME JAMES A ZILLIGEN
STREET ADDRESS 2222 IMPERIAL GOLF CRSE BLVD
CITY-STATE-ZIP NAPLES FL 34110

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

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****173.75 ****173.75

TITLE V.P.
NAME JAMES A ZILLIGEN
STREET ADDRESS SAME
CITY-STATE-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE SEC
NAME JAMES A ZILLIGEN
STREET ADDRESS SAME
CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE TREAS
NAME JAMES A ZILLIGEN
STREET ADDRESS SAME
CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

☐ Change ☐ Addition

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 and typed or printed name of signing officer or director

JAMES A ZILLIGEN

4.18.97

Date

941.592.5442

Daytime Phone #

CR2E034 (9/96)