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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 14 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997

(1)

1. Corporation Name FLORIDA UNITED REAL ESTATE SERVICES, INC. Principal Place of Business C/O THOMAS B. MESSIER 1400 ROYAL PALM SQUARE BLVD SUITE 102 2552 LAKE ELLEN CIR TAMPA FL 33618-3247								
FORT MYERS F		US	OIO VETI			,		
						3. Date Incorporated or Qualified 11/16/1990	3a. Date of Last F 05/01/1996	Report
2. Principal Pl	lace of Business	2a. Mailing A	Address			4. FEI Number	L A	pplied For
21	N	26 Suita Act H etc				65-0238527		ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional lequired
City & State	9		City & State			6. Election Campaign Financing		May Be
23]		28			· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution		to Fees
Ζφ 	Country	Zip		Country	•	8. This corporation has liability for		s. 199.032,
24	25 9, Name and Address of Curren	29 t Registered Apr	ent	30		Florida Statutes 10. Name and Address of New R	Yes No	
MESS	SIER, THOMAS B.			81	Name	10. 110/10 010 010 0110 01		
	ROYAL PALM SQUARE BLVD.			82	Stroot Add	dress (P.O. Box Number is Not Accepta	obla)	
	E 102			02	Oliber Aut	Gress (F.O. Box Number is 1401 Accepts		
FOR	T MYERS FL 33919			83				
				84	City		85 Zip	Code
11 Pureuard t	to the provisions of Sections 607 050	2 and 607 1508 I	Florida Statut	es the show	a-named cor	rooration submits this statement for the	FL of changing i	ite registered
office or ri agent I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida Such on the Such of Section	change was a 607.0505. Flo	authorized by orida Statute	the corpora s.	rporation submits this statement for the ation's board of directors. I hereby according to the statement of the statement for the according to the statement of	ept the appointment as	s registered
SIGNATURE	·							
12.	Sign in its typical or princed harve of registured age OFFICERS AND		TOM)	E: Registered Age	ant signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTOR	RS IN 12
Tillef	PST DELETE		DELETE	1.1 TITLE		7,00,00,00,00,00	Change	Addition
NAME	MESSIER, THOMAS B.			1.2 NAME	- (
STREET ASORESS	1400 ROYAL PALM SQ BLVD.			1.3 STREET	ADDRESS			
CITY - S1 - 7IF	FT MYERS FL		7 25.656	1.4 CITY - S	IT-ZIP			
Milf	D Messier, Thomas B.	L	DELETE	21 TITLE	1		Change	Addition
NAME SENSO A ADMINISTRA	1400 ROYAL PALM SQ BLVD.			2.3 STREET	ADDDECC			
STREET ADDRESS CHY-SU-7IP	FT MYERS FL			2.4 CITY-	1			
TIGHT			DELETE	3.1 TILE	31-61		Change	Addition
NAME				3.2 NAME			-	
STREET ADDRESS	ı			3.3 \$TREET	ADDRESS			
CITY-ST-ZIP			T DELETE	3.4. CITY - !	ST - ZIP		T AL	- 14100
Title		L.	DELETE	4.1 TITLE			L Change	■ Addition
NAME STREET ADORESS				4.2 NAME 4.3 STREET	ADDRESS			
C-TY - ST - ZIP				4.3 STREET				
1616	Name : 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		DELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY-ST-Z-P			Torura.	5.4 CITY - S	IT-ZIP			
T ILI		L.]] DELETE	6.1 TITLE	}		L. Change	Addition
RAME espect anopses				62 NAME	ADDRESS			
STREET ADDRESS	•			6.3 STREET	1			
14. Loo beret	by certify that the information supplied	with this filing d	oes not quali	6.4 CITY-5 ly for the exe	mption state	ed in Section 119.07(3)(i), Florida Statut	es. I further certify that	1 the
Filonnako Lam an of	iri indicated on this annual report or s	upplemental ann: the receiver or tri	uat report is t ustee empow	rue and accu ered to exec	urate and tha	at my signature shall have the same leg ort as required by Chapter 607, Florida	gal effect as if made un	nder oath: that

SIGNATURE: Men B. Mestil Tismis B. Mestier Tres 47-97 (88) 9
SIGNATURE AND TYPED ON PRINTED NAME OF STONING OFFICER OR DIRECTOR

Date

Date