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May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S27399 (2)

1. Corporation Name
BUCHANAN & COMPANY REALTY, INC.

Principal Place of Business

Mailing Address

317 RIVEREDGE BLVD
SUITE 102
COCOA FL 32922

317 RIVEREDGE BLVD
SUITE 102
COCOA FL 32922-7961



3. Date Incorporated or Qualified **01/23/1991** 3a. Date of Last Report **05/01/1996**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 317 RIVEREDGE BLVD	26 317 RIVEREDGE BLVD	59-3048622	<input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22 SUITE 208	27 SUITE 208	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
City & State	City & State	6. Election Campaign Financing	\$5.00 May Be Added to Fees
23 COCOA FL	28 COCOA FL	Trust Fund Contribution <input type="checkbox"/>	
Zip	Country	29 32922	30 FLORIDA
24 32922	25 FLORIDA	29 32922	30 FLORIDA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUCHANAN, MARK S.
317 RIVEREDGE BLVD
SUITE 102
COCOA FL 32922

81 Name **JOHN E. BROWER**
82 Street Address (P.O. Box Number is Not Acceptable)
317 RIVEREDGE BLVD.
83 **SUITE 208**
84 City **COCOA** FL 85 Zip Code **32922**

11. Pursuant to the provisions of Sections 607.0506 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPVT	1.1 TITLE	DPVT
NAME	BUCHANAN, MARK S	1.2 NAME	BROWER, JOHN E.
STREET ADDRESS	317 RIVEREDGE BLVD	1.3 STREET ADDRESS	317 RIVEREDGE BLVD.
CITY - ST - ZIP	COCOA FL 32922	1.4 CITY - ST - ZIP	COCOA FL 32922
TITLE	S	2.1 TITLE	S
NAME	LONG, DONALD J.	2.2 NAME	BROWER, JOHN E.
STREET ADDRESS	317 RIVEREDGE BLVD.	2.3 STREET ADDRESS	317 RIVEREDGE BLVD
CITY - ST - ZIP	COCOA FL	2.4 CITY - ST - ZIP	COCOA FL 32922
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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:

JOHN E. BROWER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/97

407-631-0070

CR2E034 (9/96)