

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TAMARA B. MATHIAS
COMMISSIONER
1000 BANKERS BUILDING
TALLAHASSEE, FLORIDA 32399-0001

**APPROVED
AND
FILED**

SEP 13 1995 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V19214**

(8)

A FRIEND IN REAL ESTATE, INC.

(PLEASE WRITE IN THIS SPACE)

Principal Office Address: **12701 US 19 N. STE D HUDSON FL 34667 US**
Mailing Address: **11020 PICKERING LANE PORT RICHEY FL 34668**

3. Date first incorporated or qualified 03/05/1992	3a. Date of Last Report 09/23/1994
4. FEI Number 59-3142744	Applied Fee 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. State App # etc.	26. State App # etc.
22. City & State	27. City & State
23. Country	28. Country
24. City	29. City
25. Country	30. Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LEAR, JOHN W 11020 PICKERING LANE PORT RICHEY FL 34668		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 607.05402 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 regulations of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or New Registered Agent)

(Signature of Registered Agent or New Registered Agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	P LEAR, JOHN W 11020 PICKERING DR. PORT RICHEY FL 34668	1. TITLE	☐ Change ☐ Addition
NAME	S HOWARD, WILLIAM J 6529 TOWER DR. HUDSON FL 34667	2. NAME	
NAME		3. STREET ADDRESS	
NAME		4. CITY & ZIP	
NAME		5. TITLE	☐ Change ☐ Addition
NAME		6. NAME	
NAME		7. STREET ADDRESS	
NAME		8. CITY & ZIP	
NAME		9. TITLE	☐ Change ☐ Addition
NAME		10. NAME	
NAME		11. STREET ADDRESS	
NAME		12. CITY & ZIP	
NAME		13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
NAME		15. STREET ADDRESS	
NAME		16. CITY & ZIP	
NAME		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
NAME		19. STREET ADDRESS	
NAME		20. CITY & ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.05404, Florida Statutes. Further, I certify that the information included on this annual report or supplementary 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 this corporation or the registered trustee empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of Changes, or on an other board and an address.

SIGNATURE:

John W. Lear
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John W. LEAR

4/29/95

862-6008