2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # F03000002409 Apr 26, 2006 08:00 AN 1. Entity Name BALMORAL TENANT SERVICES, INC. **Secretary of State** Principal Place of Business Mailing Address 1440 HIGHWAY ATA 1440 HIGHWAY A1A VERO BEACH, FL 32963 VERO BEACH, FL 32963 04072006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0018370 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent F&L CORP. DO NOT WRITE ONE INDEPENDENT DRIVE **SUITE 1300** IN THIS SPACE JACKSONVILLE, FL 32202 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. DCP TITLE U00000536187 SMICK, TIMOTHY S NAME 05/08/06-80083-015 150.00 1440 HIGHWAY A1A STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32963 **DVPS** TITLE SIMMONS, DANIEL L NAME 1440 HIGHWAY A1A STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32963 TITLE AILLS, ZACH NAME 1440 HIGHWAY A1A STREET ADDRESS DO NOT WRITE VERO BEACH, FL 32963 CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

NATURE AND TYPED ON RINTED NAME OF SIGNING

4/24/02

77-492-5002

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Daytime Phone #