2008 FOR PROFIT CORPORATION

Apr 29, 2008 08:00 AN Secretary of State **ANNUAL REPORT DOCUMENT # J67675** REFERRAL REALTY GROUP, INC. Principal Place of Business Mailing Address 4200 GULF SHORE BLVD N 4200 GULF SHORE BLVD N NAPLES, FL 34103 US NAPLES, FL 34103 US 03072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2809949 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GUTMAN, HOWARD 4200 GULF SHORE BLVD NORTH NAPLES, FL 34103 IN THIS SPACE 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, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME LUTGERT, SCOTT STREET ADDRESS 4200 GULF SHORE BLVD N. NAPLES, FL CITY-ST-ZIP TITLE GUTMAN, HOWARD B NAME STREET ADDRESS 4200 GULFSHORE BLVD. N CITY-ST-ZIP NAPLES, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied windicated on this report of supplemental epot of the corporation or the receiver of trustee en changed, or on an attachment with an address. with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information this 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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if s, with all other like empowered.

TITLE NAME STREET ADDRESS CHY-ST-ZIP

SIGNATURE

Howard B. Gutman

Vice President
NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/2008 (239) 261-6100 Daytime Phone #

FILED