


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90052 029 ***150.00

DOCUMENT # L06269 1. Entity Name KILLEARN BROKERS REALTY, INC.	
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Principal Place of Business 2121-B KILLARNEY WAY TALLAHASSEE, FL 32309 US	Mailing Address 2121-B KILLARNEY WAY TALLAHASSEE, FL 32309 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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04042008 Chg-P CR2E034 (12/06)

4. FEI Number 59-2972851	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ATWELL, JENNIFER 4048 BRANDON HILL DRIVE TALLAHASSEE, FL 32309	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: T NAME: ROBERTS, GERALDINE C. STREET ADDRESS: 3518 LIMERICK DR. CITY-ST-ZIP: TALLAHASSEE, FL 32309	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP NAME: DAVIS, DIANNE D. STREET ADDRESS: 2202 KILLARNEY WAY CITY-ST-ZIP: TALLAHASSEE, FL 32309	<input type="checkbox"/> Delete	TITLE: D NAME: Davis, Dianne D. STREET ADDRESS: 2202 Killarney Way CITY-ST-ZIP: Tallahassee, FL 32309	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: HELM, NANCY H. STREET ADDRESS: 2301 KILKENNEY WY CITY-ST-ZIP: TALLAHASSEE, FL 32309	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: B NAME: DRAKE, BETTE H STREET ADDRESS: 3735 SWALLOWTAIL TRACE CITY-ST-ZIP: TALLAHASSEE, FL 32309	<input type="checkbox"/> Delete	TITLE: D NAME: Drake, Bette H. STREET ADDRESS: 3735 Swallowtail Trace CITY-ST-ZIP: Tallahassee, FL 32309	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: ATWELL, JENNIFER STREET ADDRESS: 4048 BRANDON HILL DR CITY-ST-ZIP: TALLAHASSEE, FL 32309	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete	TITLE: D NAME: Morgan, Gwen C. STREET ADDRESS: 5249 Pimlico Dr. CITY-ST-ZIP: Tallahassee, FL 32309	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing 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 607, 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: *Shari Carter - Broker* Date: 4/4/08 Daytime Phone #: 850-893-6100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

40061248

606269

OFFICERS AND DIRECTORS		CHANGES/ADDITIONS to OFFICERS & DIRECTORS	
Title	D	Title	V X Change Addition
Name	Bryars, Patricia	Name	
Address	2547 Arendell Way	Address	
City/St/Zip	Tallahassee, FL 32308	City/St/Zip	
Title	S	Title	P/S X Change Addition
Name	Hock, Abigail W.	Name	
Address	4044 McLaughlin Drive	Address	
City/St/Zip	Tallahassee, FL 32308	City/St/Zip	
Title	VP	Title	B X Change Addition
Name	Cartee, Sherrie	Name	
Address	3207 Shamrock E #27	Address	
City/St/Zip	Tallahassee, FL 32309	City/St/Zip	