

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
May 29, 2007  
Secretary of State**

DOCUMENT# P04000116195

**Entity Name:** FLAT FEE REALTY OF THE GULF COAST INC.

**Current Principal Place of Business:**

10024 S. RIVIERA PT.  
HOMOSASSA, FL 34448

**New Principal Place of Business:**

**Current Mailing Address:**

10024 S. RIVIERA PT.  
HOMOSASSA, FL 34448

**New Mailing Address:**

**FEI Number:** 20-1470401      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORONA, ELIZABETH H  
10024 S. RIVIERA PT.  
HOMOSASSA, FL 34448      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PDST ( ) Delete  
Name: CORONA, ELIZABETH H  
Address: 10024 S. RIVIERA PT.  
City-St-Zip: HOMOSASSA, FL 34448

Title: VP (X) Delete  
Name: CORONA, MATTHEW  
Address: 10024 S. RIVIERA PT.  
City-St-Zip: HOMOSASSA, FL 34448

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH H. CORONA

PDST

05/29/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date