## **2008 FOR PROFIT CORPORATION** ANNUAL REPORT

CITY-ST-7IP

SIGNATURE:

changed, or on an attachment with an address, with

## Apr 22, 2008 08:00 AN Secretary of State **DOCUMENT # P36669** 1. Entity Name LOGAN BRANDON REALTY CORP. Principal Place of Business Mailing Address 11540 HWY 92 EAST 11540 HWY 92 EAST SEFFNER, FL 33584 US SEFFNER, FL 33584 US 03312008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3053569 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BEYER, DAVID A DO NOT WRITE C/O RUDNICK & WOLFE 101 EAST KENNEDY BLVD. - SUITE 2000 IN THIS SPACE TAMPA, FL 33602-5133 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) 05/08/08-80028-025 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE SEAMAN, JULIE NAME STREET ADDRESS 11540 HWY 92 EAST CITY-ST-7IP SEFFNER, FL TITLE NAME IFNKEL, JEFFREY STREET ADDRESS 11540 HWY 92 EAST CITY-ST-719 SEFFNER, FL TITLE STEIN, LEWIS NAME STREET ADDRESS 11540 HWY 92 EAST DO NOT WRITE CITY-ST-ZIP SEFFNER, FL IN THIS SPACE TITI F NAME STREET ADDRESS CITY-ST-7IP TIRE NAME STREET ADDRESS CITY-ST-7/P TITI F NAME STREET ADORESS

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 pame appears in Block 10 or Block 11 if changed, or on an attachment with my address with of other like empowered.

FILED