


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Feb 10, 2006 08:00 AM
Secretary of State**

DOCUMENT # P95000019170
1. Entity Name
LOGAN CAROLINA PLACE REALTY CORP.



Principal Place of Business 11540 HIGHWAY 92 EAST SEFFNER, FL 33584	Mailing Address 11540 HIGHWAY 92 EAST SEFFNER, FL 33584
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01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3302046	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KETTLE, MICHAEL
C/O ROOMS TO GO
11540 HIGHWAY 92 EAST4
SEFFNER, FL 33584

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEAMAN, JULIE 11540 HIGHWAY 92 EAST SEFFNER, FL 33584
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST STEIN, LEWIS 11540 HWY 92 E SEFFNER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FINKEL, JEFFERY 11540 HWY 92 E SEFFNER, FL
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02/21/06-80043-007 150.00

**DO NOT WRITE
IN THIS SPACE**

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: _____ Date: FEB 3 2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # _____