2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2009
Secretary of State

DOCUMENT# 182459

Entity Name: BETTY-DREW APARTMENTS INC

Current Principal Place of Business:

BETTY-DREW APTS, INC.
200 N BETTY LANE
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

C/O MICHAEL DAILY, CPA
2240 BELLAIR RD STE 140
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 59-0758969 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAILY, CPA, J. MICHAEL
2240 BELLEAIR RD
SUITE 140
CLEARWATER, FL 33764 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: MACON, JERRY
Address: 200 N BETTY LN 6D
City-St-Zip: CLEARWATER, FL 33755

Title: VP ( ) Delete
Name: DUFF, CHARLES
Address: 200 N. BETTY LN. 2A
City-St-Zip: CLEARWATER, FL 33755

Title: P ( ) Delete
Name: LOVELL, SHIRLEY
Address: 200 N. BETTY LN., 2B
City-St-Zip: CLEARWATER, FL 33755

Title: D ( ) Delete
Name: BRATSOS, LINDA
Address: 200 N. BETTY LN. 6F
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: J. MICHAEL DAILY CPA 02/13/2009

Electronic Signature of Signing Officer or Director — Date