

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90044 021 ***150.00

DOCUMENT # 359783 1. Entity Name REALTY HOUSE INC	
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Principal Place of Business 99 EGLIN PARKWAY, N.E., SUITE 46 FT WALTON BEACH, FL 32548	Mailing Address 99 EGLIN PARKWAY, N.E., SUITE 46 FT WALTON BEACH, FL 32548
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DO NOT WRITE IN THIS SPACE



02012006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1296854	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BETHEA, BASIL L JR.,
99 EGLIN PARKWAY, N.E., SUITE 46
FT WALTON BEACH, FL 32548

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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 _____ 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, 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	PD BETHEA, BASIL L JR 99 EGLIN PARKWAY, NE, 46 FT WALTON BCH, FL 32548
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BETHEA, SALLY C 99 EGLIN PARKWAY, NE, 46 FT WALTON BCH, FL 32548
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Sally C Bethea VP Sally C Bethea 2/2/06 850-244-9117
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #