2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 404964

1. Entity Name
SANLANDO REALTY, INC

Principal Place of Business	Mailing Address
1701 PERCH LANE SANFORD, FL 32771 US	1701 PERCH LANE SANFORD, FL 32771

DO NOT WRITE IN THIS SPACE

02072005   No Chg-P   CR2E034 (10/03)

4. FEI Number 59-1423180	Applied For
	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

OBRIEN, MICHAEL
1701 PERCH LN.
SANFORD, FL 32771

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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)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2005 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10.   OFFICERS AND DIRECTORS

TITLE	PS
NAME	O'BRIEN, MICHAEL M
STREET ADDRESS	1701 PERCH LN.
CITY-ST-ZIP	SANFORD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/25/05-60024-022 150.00

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _Michael Morris_   4/21/05   407-923-2410

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #