## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 445328** 

Entity Name: REAL VALUE PROPERTIES, INC.

FILED Feb 12, 2009 Secretary of State

| Current Principal Place of Business:     | New Principal Place of Business:   |
|--|------------------------------------|
| Julicut i illicipui i luce di Busiliess. | New i interput i luce of Business. |

3192 YATTIKA PALCE 473 VILLAGE PLACE LONGWOOD, FL 32779 LONGWOOD, FL 32779

Current Mailing Address: New Mailing Address:

3192 YATTIKA PALCE 473 VILLAGE PLACE LONGWOOD, FL 32779 LONGWOOD, FL 32779

FEI Number: 59-1555870 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FREEMAN, JACK A
3192 YATTIKA PLACE
LONGWOOD, FL 32779 US

FREEMAN, JACK A
473 VILLAGE PLACE
LONGWOOD, FL 32779 US

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: 02/12/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Name: Address:

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: FREEMAN, JACK A, Name: FREEMAN, JACK A,

Address: 3192 YATTIKA PLACE Address: 473 VILLAGE PLACE City-St-Zip: LONGWOOD, FL City-St-Zip: LONGWOOD, FL

Title: Title: (X) Change ( ) Addition () Delete RASMUSSEN, HELENE A. RASMUSSEN, HELENE A. Name: Name: 107 FOREST POINT LANE 1460 HOLT'S GROVE CIRCLE Address: Address: LONGWOOD, FL 32779 WINTER PARK, FL 32789 City-St-Zip: City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 FREEMAN, MARK S,
 Name:
 FREEMAN, MARK S,

 Address:
 2300 MCGREGOR BLVD
 Address:
 3350 N. KEY DRIVE

 City-St-Zip:
 FT. MYERS, FL
 City-St-Zip:
 FT. MYERS, FL
 33903

Title: T ( ) Delete Title: T (X) Change ( ) Addition

FREEMAN, JACK A,
3192 YATTIKA PLACE
LONGWOOD, FL

Name: FREEMAN, JACK A,
473 VILLAGE PLACE
LONGWOOD, FL
32779

 $\label{eq:title:S} {\sf Title:S} \qquad \qquad {\sf S} \qquad {\sf () Delete} \qquad \qquad {\sf Title:S} \qquad {\sf S} \qquad {\sf (X) Change () Addition}$ 

 Name:
 FREEMAN, JEFFREY B.
 Name:
 FREEMAN, JEFFREY B.

 Address:
 RT #1, BOX 1327
 Address:
 1760 TOM COKER RD.

 City-St-Zip:
 LABELLE, FL 33935
 City-St-Zip:
 LABELLE, FL 33935

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: JACK A. FREEMAN PRES 02/12/2009