## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # 446455** 

1. Entity Name TRADERS REALTY, INC.

Mar 20, 2007 08:00 AM Secretary of State

FILED

Principal Place of Business

1325 E. TENNESSEE ST. TALLAHASSEE, FL 32308 Mailing Address

1325 E. TENNESSEE ST. TALLAHASSEE, FL 32308



03172007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-1510920 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRIS, (RONALD A.) 1325 E. TENNESSEE ST. TALLAHASSEE, FL

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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			
	FILE NOW!!! FEE IS \$150.00 r May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May 5e Trust Fund Contribution.   Added to Fees	
10.	OFFICERS AND DIRECTORS		
TITLE NAME	PD HARRIS, RONALD A	The second secon	

STREET ADDRESS **2019 LEE AVE** CITY-ST-ZIP TALLAHASSEE, FL TITLE HARRIS, RONALD A NAME STREET ADDRESS **2019 LEE AVE** CITY - ST-ZIP TALLAHASSEE, FL TITLE MOORE, TRACEY J. NAME STREET ADDRESS 1634 SPRINGWOOD DR. CITY-ST-ZIP TALLAHASSEE, FL 32308 TITLE MOORE, TRACEY J. NAME 1634 SPRINGWOOD DR STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32308 TITLE NAME STREET ADDRESS

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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:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

Ronald A. Harris / 3-19-E

(850) 878-3957

Daytime Phone #