

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90171 025 ***158.75

DOCUMENT # 447400

1. Entity Name
ACCLAIMED REAL ESTATE, INC.



Principal Place of Business
**7552 NAVARRE PARKWAY STE 1
SUITE 12
NAVARRE, FL 32566**

Mailing Address
**7552 NAVARRE PARKWAY STE 1
SUITE 12
NAVARRE, FL 32566**

40026451



01192006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1577806

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**DIROCCO, RAYMOND M
6610 NO UNIVERSITY DR #220
TAMARAC, FL 33321**

**DO NOT WRITE
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

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, 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
**P
FISCHER, HENRY W
7552 NAVAREE PKWY STE 12
NAVARRE, FL 32566**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**VS
FISCHER, BEATRICE C
7552 NAVAREE PKWY STE 12
NAVARRE, FL 32566**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

*Can you please make
a minor change with
this address:*

*7552 Navarre Pkway
(Suite) (42) - this is
the only change
Thank You!*

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:

Beatrice C. Fischer - BEATRICE C. FISCHER-2-20-06 850-217-8323

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #