2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 470188

FILED
Apr 26, 2002 8:00 AM
Secretary of State

Entity Name: REAL ESTATE ADVISORY GROUP, INC.

Current Principal Place of Business:

1617 RIDGEWOOD AVE STE F
HOLLY HILL, FL 321178750

New Principal Place of Business:

1617 RIDGEWOOD AVE STE G
HOLLY HILL, FL 321178750

Current Mailing Address:

1617 RIDGEWOOD AVE STE F
HOLLY HILL, FL 321178750

New Mailing Address:

1 JOHN ANDERSON DR. #709
ORMOND BEACH, FL 321765790 US

FEI Number: 59-1609241 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAAS, FLORENCE
1 JOHN ANDERSON DR. #709
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

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: ______________________________
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	HAAS, FRANK N,	
Address:	1501 RIDGE AVE	
City-St-Zip:	HOLLY HILL, FL	
Title:	SD	( ) Delete
Name:	HAAS, FLORENCE,	
Address:	1 JOHN ANDERSON DR- #709	
City-St-Zip:	ORMOND BEACH, FL 00000,	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PD	(X) Change ( ) Addition
Name:	WINDLE, CLIFFORD E PRES	
Address:	6 TALO CIRCLE	
City-St-Zip:	PORT ORANGE, FL 32118 US	
Title:	SD	(X) Change ( ) Addition
Name:	WINDLE, ELIZABETH SECY	
Address:	6 TALO CIRCLE	
City-St-Zip:	PORT ORANGE, FL 32118 US	
Title:	VPD	( ) Change (X) Addition
Name:	HAAS, FLORENCE N VP	
Address:	1 JOHN ANDERSON DR. #709	
City-St-Zip:	ORMOND BEACH, FL 321765790 US	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CLIFFORD E. WINDLE PRES 04/26/2002
Electronic Signature of Signing Officer or Director Date