**FILED** 

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

## Aug 04, 2003 8:00 am Secretary of State **DOCUMENT #** 470188 08-04-2003 90138 022 \*\*\*150.00 1. Entity Name REAL ESTATE ADVISORY GROUP, INC. Principal Place of Business Mailing Address 1617 RIDGEWOOD AVE STE G 1 JOHN ANDERSON DR. #709 HOLLY HILL FL 32117-8750 ORMOND BEACH FL 32176-5790 2. Principal Place of Business 3. Mailing Address IRCLE ALO Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State 4. FEI Number Applied For City & State 59-1609241 Not Applicable Zin \$8.75 Additional 5. Certificate of Status Desired OLUSÍA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HAAS, FLORENCE Box Number is Not Acceptable) 1 JOHN ANDERSON DR. #709 ORMOND BEACH FL 32176 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. SIGNĂTURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 \$5.00 May Be 9. Election Campaign Financing After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. PD and SD TITLE ☐ Delete TITLE ☐ Addition WINDLE, CLIFFORD E PRES NAME STREET ADDRESS 6 TALO CIRCLE STREET ADDRESS PORT ORANGE FL 82118 3み/みり CITY-ST-ZIP CITY-ST-ZIP TITLE 🔼 Delete ☐ Change ☐ Addition TITLE NAME WINDLE, ELIZABETH SECY NAME STREET ADDRESS STREET ADDRESS 6 TALO CIRCLE CITY-ST-ZIP PORT ORANGE FL 32118 CITY-ST-ZIP 🔀 Delete Change ☐ Addition TITLE TITLE NAME HAAS, FLORENCE N VP NAME STREET ADDRESS STREET ADDRESS 1 JOHN ANDERSON DR. #709 CITY-ST-ZIP CITY-ST-ZIP ORMOND BEACH FL 32176-5790 TITLE Delete TITLE Change **Addition** DONALD A. HARS, UP Change I JOHN AMBERON DR. # 709 NAME STREET ADDRESS STREET ADDRESS DRMOND BEACH, FL 32176-5790 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

0Haehment 90148629

## REAL ESTATE ADVISORY GROUP, INC.

Six Talo Circle Port Orange, Florida 32118 Tel: (386) 760-1163 Fax: (386) 760-0095 E-Mail: BuzzyWindle@aol.com

July 29, 2003

**Division of Corporations Uniform Business Report Filings** P. O. Box 1500 Tallahassee, FL 32302-1500

Dear Gentlepersons:

In accordance with telephonic instructions by the Diviston we herewith submit our 2003 For Profit UBR, Doc #(470188, with corrections, and our check for \$150.00.

For the year 2002 we filed electronically and have received the enclosed 2003 form as our FIRST NOTICE. We have never received any notice, by mail or electronically prior to this date. Your office has therefore instructed us to file as first notice filing.

We also enclose a copy of our receipt for electronic filing 2002.

Thank you for your courtesies and assistance.

Cordially,

Clifford E. Windle, President and Director

Cc: D. A. Haas, VP-D

03-REAG-UBR