

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 477504

1. Entity Name

LAFAYETTE REALTY, INC.



Principal Place of Business

3228 MAHAN DRIVE
TALLAHASSEE, FL 32308

Mailing Address

3228 MAHAN DRIVE
TALLAHASSEE, FL 32308

FILED

07 MAY -3 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05032007 No Chg-P CR2E034 (11/05)

07

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1642466

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WINSLETT, ERNEST
3228 MAHAN DRIVE
TALLAHASSEE, FL 32308-5510

**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
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PVD
NAME	WINSLETT, ERNEST R
STREET ADDRESS	2243 TRESCOTT DR
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	ST
NAME	WINSLETT, BARBARA A
STREET ADDRESS	2243 TRESCOTT DR
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000102233780
05/14/07--01003--027 **150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Barbara A. Winslett Barbara Winslett 5/1/07 877-3166

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #