2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 481233

FILED Apr 15, 2009 Secretary of State

Entity Name: HAROLD T. GOFFE, REALTOR INCORPORATED

Current Principal Place of Business:		New Principal Place of Business:		
	MA LANE ACH, FL 3348	0		
Current Mailing Address:		New Mailing Address:		
	MA LANE ACH, FL 3348	0		
El Number	: 59-1780524	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ()
lame and	d Address of (Current Registered Agent:	Name and Address of	of New Registered Agent:
235 SOÚT		OAD SUITE #9		
'ALM BE	ACH, FL	US		
he above	,		purpose of changing its registere	ed office or registered agent, or both,
he above the Stat	e named entity e of Florida.		purpose of changing its registere	ed office or registered agent, or both,
he above the Stat	e named entity e of Florida. RE:			ed office or registered agent, or both, Date
he above the Stat	e named entity e of Florida. RE: Electro	submits this statement for the		
n the State	e named entity e of Florida. RE: Electro	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution ().	ent	
The above the Stati SIGNATU	e named entity e of Florida. RE:Electroi mpaign Financin S AND DIREC	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete DD T. JR. DRIVE	ent	Date
The above in the State SIGNATU Election Caron Ca	e named entity e of Florida. RE: Electrol mpaign Financin S AND DIREC P (GOFFE, HARO 5527 PAPAYA PUNTA GORDA	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution (). ETORS:) Delete DLD T. JR. DRIVE A, FL 33982) Delete ETH A.	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: KENNETH A. GOFFE VP 04/15/2009