

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

07-27-2006 90016001 ***150.00

505706

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP 11 PM 4:07

DOCUMENT # 505706

1. Entity Name

LONDON REAL ESTATE COMPANY



Principal Place of Business

50 WEST MASHTA DRIVE, SUITE 5
KEY BISCAYNE, FL 33149

Mailing Address

641 SOUTH MASHTA DRIVE
KEY BISCAYNE, FL 33149



05082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1679172

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROBERTS, NORMAN T
50 W. MASHTA DRIVE, SUITE 4
KEY BISCAYNE, FL 33149

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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 re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

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	P
NAME	LONDON, I E
STREET ADDRESS	50 W MASHTA STE 5
CITY- ST- ZIP	KEY BISCAYNE, FL
TITLE	LONDON, VICTORIA T
NAME	LONDON, VICTORIA T
STREET ADDRESS	641 S MASHTA DR
CITY- ST- ZIP	KEY BISCAYNE, FL 33149
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

I EDWARD
LONDON

5/8/06

Date

305-962-0313

Daytime Phone