

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2008 8:00 am
Secretary of State

01-18-2008 90007 034 ***150.00

DOCUMENT # 507169

1. Entity Name
DONOVAN REALTY, INC.



Principal Place of Business
**223 E. GOVERNMENT ST.
PENSACOLA, FL 32502 US**

Mailing Address
**223 E. GOVERNMENT ST.
PENSACOLA, FL 32502 US**

DO NOT WRITE IN THIS SPACE



01072008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1680156

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~DONOVAN, JOHN C. SR.~~ **DONOVAN, MARTIN J.**
**223 E GOVERNMENT ST
PENSACOLA, FL 32502**

**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 **MARTIN J. DONOVAN**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

1/11/2008

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE C
NAME DONOVAN SR, JOHN C
STREET ADDRESS 223 E GOVERNMENT ST
CITY-ST-ZIP PENSACOLA, FL 32502

TITLE P
NAME DONOVAN, MARTIN J
STREET ADDRESS 4005 AIKEN RD
CITY-ST-ZIP PENSACOLA, FL 32503

TITLE
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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: **PRES. MARTIN J. DONOVAN** 1/11/08 850 432-6107
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #