## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE

## **FILED** Apr 12, 2007 08:00 All Secretary of State **DOCUMENT # 512227** 1. Entity Name MCCALL & MCCALL REALTY, INC. Principal Place of Business Mailing Address 1209 EDGEWATER DRIVE 1209 EDGEWATER DRIVE ORLANDO FL 32804 ORLANDO FL 32804 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-1753299 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCCALL, KENNETH GARY 3103 ARDLEY DRIVE Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32804 Zip Code 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 tille if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete HILL DILL Change ☐ Addition MCCALL, KENNETH GARY NAME NAME 3103 ARDSLEY DRIVE STREET ADDRESS U00000703770 04/20/07-80147-025 150.00 STREET ADDRESS ORLANDO FL CITY-S1-7P CITY - ST- 7/P TITLE ☐ Detete HHE Change ■ Addition NAME NAME STREET ADDRESS STRUCT ADDRESS CITY-ST-ZIP CITY - S1 - 7IP 1114 6 Detete TITLE ☐ Change □ Addition NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP mir. Delete IIDE □ Change ☐ Addition NAME NAME STRELL ADDRESS SHIFT ADDRESS CITY+SI-ZIP CHY-ST-7IP THEF Detelo TITLE Addition ☐ Change NAMI NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP mit Delete HDE ☐ Change Addition NAME NAM: STREET ADDRESS STREET ADDRESS CITY - S1-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 logal effect as if made under eath, that I am an efficer 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 attagnment with an appropriate with all other like empowered.

OF SIGNING OFFICER OR DIRECTOR