

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # 518362

1. Entity Name
REAL ESTATE ONE, INC.



Principal Place of Business
1200 W HIGHWAY 434
SUITE 100
LONGWOOD, FL 32750 US

Mailing Address
1200 W HIGHWAY 434
SUITE 100
LONGWOOD, FL 32750 US



04042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1714867	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

PULTE T J
1200 W. HIGHWAY 434
STE 102
LONGWOOD, FL 32750

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

000000527924
05/05/06-80016-007 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ELSEA, RICHARD S
STREET ADDRESS	30043 FOX RUN
CITY - ST - ZIP	BIRMINGHAM, MI

TITLE	S
NAME	TICKNER, ELLEN M
STREET ADDRESS	4140 N FULTON PLACE
CITY - ST - ZIP	ROYAL OAK, MI 48073

TITLE	T
NAME	DENHOLM, DOUGLAS M
STREET ADDRESS	1343 WOODBRIDGE LN
CITY - ST - ZIP	WIXOM, MI 48393

TITLE	VP
NAME	PULTE, T. J.
STREET ADDRESS	3323 S ST. LUCIE DRIVE
CITY - ST - ZIP	CASSELBERRY, FL

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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: Douglas M. Denholm DOUGLAS M. DENHOLM 4-14-06 248-208-2908
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #