2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2007
Secretary of State

DOCUMENT# 565870

Entity Name: PRIME REALTY ASSOCIATES, INC.

Current Principal Place of Business:

6300 PARK OF COMMERCE BLVD.
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

C/O CORP SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 65-0171493 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	CANNATARO, BARBARA	
Address:	6300 PARK OF COMMERCE BLVD	
City-St-Zip:	BOCA RATON, FL 33487	
Title:	VP	( ) Delete
Name:	LESTER, ANDREW C	
Address:	6300 PARK OF COMMERCE BLVD.	
City-St-Zip:	BOCA RATON, FL 33487	
Title:	AS	( ) Delete
Name:	FRIEDRIECHSEN, JOHN B	
Address:	1140 BAY STREET, STE. 4000	
City-St-Zip:	TORONTO, ON M552B4 US	
Title:	D	( ) Delete
Name:	SWATT, MYRON L	
Address:	6300 PARK OF COMMERCE BLVD	
City-St-Zip:	BOCA RATON, FL 33487	
Title:	ST	( ) Delete
Name:	LANG, WENDY	
Address:	6300 PARK OF COMMERCE BLVD	
City-St-Zip:	BOCA RATON, FL 33487	
Title:	CEOP	( ) Delete
Name:	SOLLINS, CHARLES D	
Address:	6300 PARK OF COMMERCE BLVD	
City-St-Zip:	BOCA RATON, FL 33487	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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: WENDY LANG ST 01/23/2007

Electronic Signature of Signing Officer or Director — Date