

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 617975

FILED  
Feb 22, 2006  
Secretary of State

Entity Name: A MACDILL REALTY CORPORATION

**Current Principal Place of Business:**

4327 BAY TO BAY BLVD  
TAMPA, FL 336296606

**New Principal Place of Business:**

**Current Mailing Address:**

4327 BAY TO BAY BLVD  
TAMPA, FL 336296606

**New Mailing Address:**

FEI Number: 59-1883126

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MAURO, ROBERT J  
4327 BAY TO BAY BLVD  
TAMPA, FL 33629 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: PD ( ) Delete  
Name: MAURO, ROSEMARIE  
Address: 2325 FERN PLACE  
City-St-Zip: TAMPA, FL 00000, 33604

Title: VTD ( ) Delete  
Name: MAURO, SERAFINO T,  
Address: 2325 FERN PL  
City-St-Zip: TAMPA, FLORIDA 33604,

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: ROBERT J. MAURO

RA

02/22/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date