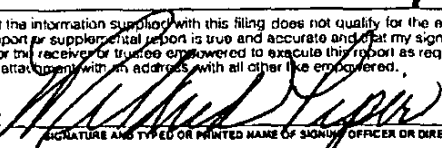


FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90004 019 ***150.00

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 648301 1. Entity Name DELTONA LAKES REALTY, INC.			
Principal Place of Business 1200 DELTONA BLVD. #61 DELTONA, FL 32725 US		Mailing Address 1200 DELTONA BLVD. #61 DELTONA, FL 32725 US	
2. Principal Place of Business - No P.O. Box # 2955 Enterprise Road Suite, Apt. #, etc. Suite 100 City & State DeBary, FL Zip 32713 Country US		3. Mailing Address 2955 Enterprise Road Suite, Apt. #, etc. Suite 100 City & State DeBary, FL Zip 32713 Country US	
02062008 Chg-P CR2E034 (12/06)		4. FEI Number 59-1957872 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent PIPER, MILDRED 1200 DELTONA BLVD. DELTONA, FL 32725		7. Name and Address of New Registered Agent: Name Piper, Mildred Street Address (P.O. Box Number is Not Acceptable) 2955 Enterprise Road, Suite 100 City DeBary FL Zip Code 32713	
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 changing) DATE _____			
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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PIPER, MILDRED A. 1200 DELTONA BLVD. DELTONA, FL 32725 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2955 Enterprise Road, Suite 100 DeBary, FL 32713 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 the incorporated.			
SIGNATURE: 		Date: 3-17-08 386-514-1401	