## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

## Jan 20, 2006 08:00 AM **DOCUMENT #691187 Secretary of State** HOME CENTER REALTY, INC. Mailing Address Principal Place of Business BOX 321421 3420 N COURTENAY PKWY. COCOA BEACH, FL 32932 US MERRITT ISLAND, FL 32953 US The second secon 01042006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4 FEI Number Not Applicable 59-2111696 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LUCAS, RONALD J DO NOT WRITE 429 WATTS WAY COCOA BEACH, FL 32931 IN THIS SPACE 3. 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 title if applicable (NOTE: Registered Agent standage required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TIBE LUCAS, RONALD J NAME STREET ADDRESS 429 WATTS WAY CITY-ST-ZIP COCOA BEACH, FL 00000, U00900391687 01/24/06-80052-808 150.00 TITLE LUCAS, DORIS NAME STREET ADDRESS 429 WATTS WAY CITY-ST-ZIP COCOA BEACH, FL 7777 5 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS &FTY-57-ZIP TITLE MARKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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

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R PRINTED NAME OF SIGNING OFFICER OR ORECTOR

**FILED** 

321-480-3510

1-15-06