2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 14, 2006 8:00 am Secretary of State DOCÚMENT # F01000001978 1. Entity Name 03-14-2006 90018 033 ***158.75 PEGASUS REALTY GROUP, INC. Principal Place of Business Mailing Address 131 EAST WYNNEWOOD RD MERION STATION PA 19066-1626 131 EAST WYNNEWOOD RD MERION STATION PA 19066-1626 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Applied For 4. FEI Number City & State City & State 23-2819670 Not Applicable Zip Country - Zip \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent M. BACKOS ANTHONY BACKOS, ANTHONY M Street Address (P.O. Box Number is Not Acceptable) 7413 MELDIN COURT NEW ADDRESS FOR REGISTERED AGENT NAPLES FL 34104 NAPLES 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 M. BACKOS 2/27/06 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS TITLE TITLE ☐ Delete CATHERINE A. BACKOS BACKOS, CATHEINE A NAME NAME 4548 BRYNWOOD DRIVE (NEW ADDRESS ONLY) 7413 MELDIN COURT STREET ADDRESS STREET ADDRESS (SEE NEW ADDRESS -> NAPLES, FL 34119 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL ☐ Change VST Addition TITLE ☐ Delete TITLE BACKOS, ANTHONY M NAME NAME STREET ADDRESS 131 E WYNNEWOOD ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MERION STATION PA Addition ☐ Detete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

THE ANTHONY M. BACICOS, VP

FILED