

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90211 030 ***150.00

DOCUMENT # F02000000929

1. Entity Name
BARCAP REALTY SERVICES GROUP, INC.



Principal Place of Business
**109 WEST COMMERCIAL STREET
SANFORD, FL 32771**

Mailing Address
**109 WEST COMMERCIAL STREET
SANFORD, FL 32771**

DO NOT WRITE IN THIS SPACE



04042006 No Chg-P CR2E034 (11/05)

4. FEI Number
58-2454697

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

BARDN
~~BACER~~ CAPITAL IV, INC.
**109 WEST COMMERCIAL STREET WEST COMMERCIAL ST.
SANFORD, FL 32771**

**DO NOT WRITE
IN THIS SPACE**

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

J. Stephen Miller
J. STEPHEN MILLER

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-24-06

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME RYDELL, JEROME S
STREET ADDRESS 109 WEST COMMERCIAL STREET
CITY-ST-ZIP SANFORD, FL 32771

TITLE V
NAME MILLER, J. STEPHEN
STREET ADDRESS 109 WEST COMMERCIAL STREET
CITY-ST-ZIP SANFORD, FL 32771

TITLE
NAME
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IN THIS SPACE**

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 like empowered.

SIGNATURE:

J. Stephen Miller
J. STEPHEN MILLER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-06

Date

4076887362

Daytime Phone #