

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # F02000002599

1. Entity Name

ANN PICARD REALTY, INC.



Principal Place of Business

**25042 PERDIDO BEACH BLVD.
ORANGE BEACH, AL 36561**

Mailing Address

**P.O. BOX 1147
ORANGE BEACH, AL 36561**



04252006 No Chg-P CR2E034 (11/05)

**4. FEI Number
63-1261806**

**Applied For
Not Applicable**

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MCCABE, JOHN
506 HWY 98 E
DESTIN, FL 32541**

**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

Signature, typed or printed name of registered agent and fee is applicable.

(Typed name of registered agent signature required when reinstating)

DATE

**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**

**000000549320
05/13/06-80017-006 150.00**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PICARD, ANN
STREET ADDRESS	P.O. BOX 1147
CITY-ST-ZIP	ORANGE BEACH, AL 36561
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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:

Ann Picard
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-06 251-981-2616
Date Daytime Phone