2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004874

Entity Name: STEWART PROPERTY UNLIMITED, INC.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	IST ST - STE POLIS, IN 4626			
Current Mailing Address:			New Mailing Address:	
P O BOX [·] HALLAND	1438 ALE, FL 3300	81438		
FEI Number	: 20-5158852	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of (Current Registered Agent:	Name and Address of	of New Registered Agent:
3535 S. O STE 1605	T, JAMES C CEAN DRIVE DOD, FL 3301	9 US		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
SIGNATU				
Election Car		nic Signature of Registered Ag g Trust Fund Contribution ().	ent	Date
		• , ,	ADDITIONS (CHANG	ES TO OFFICERS AND DIRECTORS
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS
Title:	,) Delete	Title:	() Change () Addition
Name: Address:	STEWART, JA 3535 S. OCEA	N DRIVE STE. 1605	Name: Address:	
City-St-Zip:	HOLLYWOOD		City-St-Zip:	
Title:	VC () Delete	Title:	() Change () Addition
Name:	STEWART, AN	•	Name:	
Address:	3029 NE 188T	H STREET, APT 803	Address:	
City-St-Zip:	AVENTURA, FI	_ 33180	City-St-Zip:	
Title:	VPST () Delete	Title:	() Change () Addition
Name:	STEWART, AN		Name:	
Address:		H STREET, APT 803	Address:	
City-St-Zip:	AVENTURA, FI	_ 33180	City-St-Zip:	
Title:	,) Delete	Title:	() Change () Addition
Name:	STEWART, LIN	NDA M	Name:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ANTHONY B STEWART VPST 01/14/2009

3535 S. OCEAN DRIVE STE. 1605

HOLLYWOOD, FL 33019

Address:

City-St-Zip: