2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005712

Entity Name: RESIDENTIAL LAND SERVICES, INC.

FILED Jan 09, 2007 Secretary of State

Current Principal Place of Business:			New Pri	New Principal Place of Business:	
621 24TH / NORMAN,	AVE SW OK 73069				
Current Mailing Address:			New Mai	New Mailing Address:	
621 24TH / NORMAN,	AVE SW OK 73069				
FEI Number:	73-1614496	FEI Number Applied For()	FEI Number Not Ap	Applicable () Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name ar	and Address of New Registered Agent:	
TALLAHAS	TRE POINTE I SSEE, FL 323	08 US	rpose of changing	ng its registered office or registered agent, or both,	
in the State	of Florida.	·			
SIGNATUF		nic Signature of Registered Agen	+	Date	
Election Can		g Trust Fund Contribution ().	L	Date	
		. ,			
OFFICERS	S AND DIREC	TORS:	ADDITIC	ONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	C () FULLER, MARI 621 24TH AVE NORMAN, OK	SW	Title: Name: Address: City-St-Zip	D (X) Change () Addition FULLER, MARK 621 24TH AVE SW p: NORMAN, OK 73069	
Title: Name: Address: City-St-Zip:	STEVENS, TER	ALLEY MILLS RD SUITE 2	Title: Name: Address: City-St-Zip		
Title: Name: Address: City-St-Zip:	D () GLICKMAN, RO 1 FIRST AMER SANTA ANA, CA	ICAN WAY	Title: Name: Address: City-St-Zip	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () WEBB, PHIL 5 FIRST AMER SANTA ANA, C		Title: Name: Address: City-St-Zip	()Change ()Addition p:	
Title: Name: Address: City-St-Zip:	P () PRATT, RON 621 24TH AVE NORMAN, OK		Title: Name: Address: City-St-Zip	()Change ()Addition p:	
Title: Name: Address: City-St-Zip:	V () HUNN, NANCY 5265 EAST BA' CLEARWATER	Y DRIVE #424	Title: Name: Address: City-St-Zip	V (X) Change () Addition STROM, EARL N 621 24TH AVE SW p: NORMAN, OK 73069	

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: MARK A FULLER D 01/09/2007