2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # F06000007918

1. Entity Name
DEFENDER REALTY, INC.

Principal Place of Business	Mailing Address
6301 N. OCEAN BLVD. MYRTLE BEACH, SC 29577	P.O. BOX 3849 MYRTLE BEACH, SC 29578

DO NOT WRITE IN THIS SPACE

01162008 No Chg-P CR2E034 (11/05)

4. FEI Number
57-1046618

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BAKER, FRANK
10800 S. OCEAN DR.
JENSEN BEACH, FL 34957

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 Ex Vice President 1-21-08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

U00000797369
01/29/08-80071-010 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MCKELVEY, KENNETH
STREET ADDRESS	P.O. BOX 3849
CITY-ST-ZIP	MYRTLE BEACH, SC 29578
TITLE	VP
NAME	BAKER, FRANK
STREET ADDRESS	P.O. BOX 3849
CITY-ST-ZIP	MYRTLE BEACH, SC 29578
TITLE	BROK
NAME	WILLIAMSON, VERNON
STREET ADDRESS	3024 S. OAKLAND FOREST DRIVE #3105
CITY-ST-ZIP	OAKLAND PARK, FL 33309
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: Ex V. Pres - 1-21-08 843 497-6431
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #