

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # F06000007918 1. Entity Name DEFENDER REALTY, INC.	
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Principal Place of Business 6301 N. OCEAN BLVD. MYRTLE BEACH, SC 29577	Mailing Address P.O. BOX 3849 MYRTLE BEACH, SC 29578
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DO NOT WRITE IN THIS SPACE

01162008 No Chg-P CR2E034 (11/05)

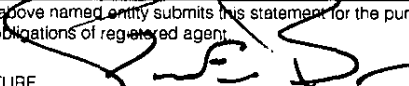
4. FEI Number 57-1046618	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

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** DATE **1-21-08**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

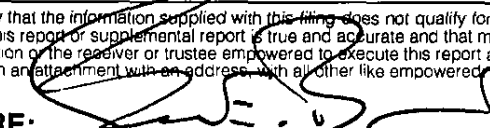
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U00000797369 01/29/08-80071-010 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MCKELVEY, KENNETH P.O. BOX 3849 MYRTLE BEACH, SC 29578
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP BAKER, FRANK P.O. BOX 3849 MYRTLE BEACH, SC 29578
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BROK WILLIAMSON, VERNON 3024 S. OAKLAND FOREST DRIVE #3105 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	

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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:  **Ex V. P.** DATE **1-21-08** DAYTIME PHONE # **843 497-6431**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR