


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT-**

FILED
May 17, 2007 08:00 A
Secretary of State

DOCUMENT # F10373 1. Entity Name THE DOT REALTY CORPORATION	
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Principal Place of Business 6010 SANDERS ST SUITE F PENSACOLA, FL 32504	Mailing Address 679 RABBIT CREEK LANE THOUSAND OAKS, CA 91320 US
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05142007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2057686	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GREENE, DOROTHY A
6010 SANDERS ST.
SUITE F
PENSACOLA, FL 32504**

**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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENE, JOSEPH 679 RABBIT CREEK LANE THOUSAND OAKS, CA 91320
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST GREENE, DOROTHY A 679 RABBIT CREEK LANE THOUSANDS OAKS, CA 91320
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05/31/07-80015-013 158.75

**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:  **5-9-07 3383125**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #