## , 2006 FOR PROFIT CORPORATION ANNUAL REPORT FILED Apr 28, 2006 08:00 AN DOCUMENT #F13187 **Secretary of State** 1. Entity Name HUTCHINGS REALTY, INC. Principal Place of Business Mailing Address 261 WESTWARD DR. #101 261 WESTWARD DR. #101 MIAMI SPRINGS, FL 33166 MIAMI SPRINGS, FL 33166 CR2E034 (11/05) 04242006 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2063185 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HUTCHINGS, M. JOAN DO NOT WRITE 1160 IBIS AVENUE MIAMI SPRINGS, FL 33166 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. Lam 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10, PST TITLE HUTCHINGS, M. JOAN NAME STREET ADDRESS 1160 IBIS AVENUE MIAMI SPRINGS, FL CITY-ST-ZIP U00000543534 05/10/06-80141-012 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

CEN OR DIRECTOR