

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F28772

FILED
Feb 08, 2006
Secretary of State

Entity Name: AMERICAN REALTY OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

1270 N EGLIN PARKWAY
SHALIMAR, FL 32579

New Principal Place of Business:

Current Mailing Address:

1270 N EGLIN PARKWAY
SHALIMAR, FL 32579

New Mailing Address:

FEI Number: 59-2087359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRAZIER, GLORIA K
1270 N EGLIN PARKWAY
BOX 875
SHALIMAR, FL 32579 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRAZIER, GLORIA K
Address: 11 GRANDVIEW DR
City-St-Zip: SHALIMAR, FL 32579

Title: V () Delete
Name: INNESS, BEVERLY D
Address: 9 DORAL DRIVE
City-St-Zip: SHALIMAR, FL 32579

Title: V () Delete
Name: HUGHES, DAWN
Address: P.O. BOX 875 N/A
City-St-Zip: SHALIMAR, FL 32579

Title: V () Delete
Name: BUCHANAN, DOROTHY H
Address: P.O. BOX 875 N/A
City-St-Zip: SHALIMAR, FL 32879

Title: VP () Delete
Name: FRANKS, LUCINDA J
Address: 113 LISA MARIE
City-St-Zip: SHALIMAR, FL 32579

Title: VP () Delete
Name: WILLIAMS, PATRICIA
Address: 245 ELDRIDGE RD
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GLORIA K. FRAZIER

P

02/08/2006

Electronic Signature of Signing Officer or Director

Date