## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F62957

Address:

City-St-Zip:

8900 BRIGHTON LANE

BONITA SPRINGS, FL 34135 US

FILED Apr 24, 2006 Secretary of State

Entity Name: CONSOLIDATED REALTY HOLDINGS (U.S.), INC.

**Current Principal Place of Business: New Principal Place of Business:** 1130 ESTERO BLVD FT MYERS BEACH, FL 33931 US **Current Mailing Address: New Mailing Address:** 8900 BRIGHTON LANE 9020 THE LANE BONITA SPRINGS, FL 34135 US NAPLES, FL 34109 US FEI Number: 59-2135692 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MEYERS, AMANDA MEYERS, AMANDA 9077 THÉ LANE 8900 BRIGHTON LANE BONITA SPRINGS, FL 34135 US NAPLES, FL 34109 US 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: AMANDA MEYERS 04/24/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition MEYERS, AMANDA MEYERS, AMANDA Name: Name: 8900 BRIGHTON LANE 9077 THE LANE Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 US City-St-Zip: NAPLES, FL 34109 US Title: Title: () Delete () Change () Addition Name: BURNS, FRED Name: 8900 BRIGHTON LANE Address: Address: BONITA SPRINGS, FL 34135 US City-St-Zip: City-St-Zip: ( ) Delete Title: Title: D (X) Change ( ) Addition MEYERS, AMANDA MEYERS, AMANDA Name: Name: 8900 BRIGHTON LANE 9077 THE LANE Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 US City-St-Zip: NAPLES, FL 34109 US Title: () Delete Title: () Change () Addition BURNS, FRED Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: AMANDA MEYERS P 04/24/2006