2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # F70766

DHI REALTY HOLDINGS, INC.

Principal Place of Business

1095 W MORSE BLVD WINTER PARK, FL 32789 US Mailing Address

1095 W MORSE BLVD

WINTER PARK, FL 32789 US

FILED Feb 29, 2008 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

02252008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2183624 Applied For

5. Certificate of Status Desired

\$8,75 Additional Fee Required

6. Name and Address of Current Registered Agent

BANGS, TERRY W. 1095 W. MORSE BLVD. WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	urpose of changing its regis	tered office	or register	red agent, or be	oth, in the S	State of Florida	. I am familiar	with, and	accept
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable (NOTE Regis	tered Agent sig	nature required	s when reinstering)		J00000084			
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Fir Trust Fund Contribution			.00 May Be led to Fees	1 03/	12/08-80	JO21-009	158.	75
10.	OFFICERS AND DIREC	TORS			·	· .		-, -, -, -	1 A F1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DP BANGS, TERRY W. 1095 W MORSE BLVD WINTER PARK, FL 32789 DST SCHULTZ, KENNETH H.		, c		· · · · · · · · · · · · · · · · · · ·					
STREET ADDRESS CITY-ST-ZIP	1095 W MORSE BLVD WINTER PARK, FL 32789									
TITLE NAME STREET ADDRESS CITY-ST-ZIP					DO	NO	T WA	ITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN	THIS	SSPA	CE	ration of the second	
TITLE NAME STREET AOORESS CITY-ST-ZIP			,	,						

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:

TITLE NAME STREET ADDRESS

IGNING OFFICER OR DIRECTOR

Kenneth Schultz

02/25/08

(407) 645~3211 x135

Daytime Phone #