


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 12, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # F93000005391**  
1. Entity Name  
**REALTY ONE, INC.**



Principal Place of Business <b>2451 MCMALLEN BOOTH RD SUITE 223 CLEARWATER, FL 33759 US</b>	Mailing Address <b>2451 MCMALLEN BOOTH RD SUITE 223 CLEARWATER, FL 33759 US</b>
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01052007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

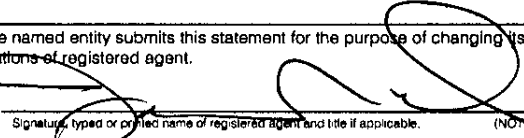
4. FEI Number <b>52-1770892</b>	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**NOEL, JERRY  
2519 MCMULLEN BOOTH RD  
STE 510-257  
CLEARWATER, FL 33761**

**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  DATE **1/4/07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE <b>P</b>	<b>NOEL, JERRY</b>
NAME	<b>NOEL, JERRY</b>
STREET ADDRESS	<b>2519 MCMULLEN BOOTH RD.</b>
CITY-ST-ZIP	<b>CLEARWATER, FL 33761</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	

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**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:  DATE: **1/4/07** (727) **467-4282**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #