


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 18, 2008 8:00 am
Secretary of State

07-18-2008 90016 007 ***150.00

DOCUMENT # G 21273	
1. Entity Name REALTY MANAGEMENT ENT	

Principal Place of Business 6228 4TH AVE ST. PETERSBURG, FL 33710 US	Mailing Address PO BOX 40036 ST. PETERBURG, FL 33710-8411 US
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DO NOT WRITE IN THIS SPACE

60045159



No Chg-P **CR2E034 (11/05)**

4. FEI Number 6	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ROBERTA FRANCIS JR. 6228 4th Ave North ST. PETERSBURG, FL 33710
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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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	6
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P, D. Robert A. Francis, Jr. PO BOX 40036 ST. PETERSBURG, FL 33743-0036
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPSTB PAUL A FRANCIS 6228 4th Ave No. ST. PETER, FL 33710
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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: 	7-11-08	727 345 4584
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #