2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2008 08:00 AN Secretary of State

DOCU	MENT # G37884	LREPORT					Secretary	of Sta
	AGE REALTY, CORP.							
Principal Plac	Mailing Address							
700 A1A HWY P 0 B0X 3351 JUPITER, FL 33469		P O BOX 3351 JUPITER, FL 33469		1 		II 8/8/1 8 / 8/1 8/8/1 8/8/1 8/8/1		
2. Principal f	Place of Business - No P.O. Box #	3. Mailing Address					7	
Suite, Apt #, etc.		Suite, Apt. #, etc.		03172008	Chg-P	CR2E034 (12/06))	
City & State		City & State		4. FEI Numbe 59-2347		⊢ -∔-	Applied For Not Applicable	
Zip	Country Z _I p		Country		 	of Status Desired	□ \$8.75 Ac Fee Requir	
	6. Name and Address of Curren	Registered Agent			7. Name and	Address of New I	Registered Agent	
DATUVE D.C.				Name				
RATHKE, R C 700 A1A HWY JUPITER, FL 33477				Street Address (P.O. Box Number is Not Acceptable)				
			City				FL Zip Cod	de
8. The above the obligat	e named entity submits this statement f tions of registered agent.	or the purpose of changing	its register	ed office or registe	ered agent, or both	n, in the State of FI	orida. I am familiar with	, and accept
SIGNATURE.	Signature, typed or printed name of registered agen	t and title il applicable (N	OTE: Registere	id Agent signature require	od wnen reinstating)		DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550	9. Election Camp			i.00 May Be ded to Fees			
10.	OFFICERS AND	L DIRECTORS	11.		ADDITIONS/0	CHANGES TO OFF	FICERS AND DIRECTOR	RS IN 11
TITLE	PD	☐ Delete	TITLI	E			Change	Addition
NAME.	RATHKE, RICHARD		NAM	-				
STREET ADDRESS CITY-ST-ZIP	700 A1A HWY JUPITER, FL			ET ADDRESS - ST - ZIP	05/27/08-80103-005 150.00			
	SD SD					<u>US/27/U8-</u>		
TITLE NAME	RATHKE, CAROLA	☐ Delete	TITU: NAM				Change	Addition
STREET ADDRESS	700 A1A HWY			E1 ADDRESS				
CITY - ST - ZIP	JUPITER, FL		CITY	-ST-ZIP				
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME			NAM	I				
STREET ADDRESS CITY-ST-ZIP		•		ET ADDRESS - ST-ZIP				
TITLE		☐ Delete	IITLE	:			☐ Change	Addition
NAME			NAMI					
STREET ADDRESS CITY-\$1-ZIP				et address -ST-Zip				
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME STREET ADDRESS			NAMI	ET ADDRESS				
CITY-ST-ZIP				-ST-ZIP				
TITLE		☐ Delete	TITLE		 		☐ Change	☐ Addition
NAME			NAME	l l				
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP	<u> </u>			-SI-ZIP				
of the cor	certify that the information supplied with on this report or supplemental report i poration or the receiver or frustee emp	s true and accurate and that owered to execute this repo	t mv sionat	ure shall have the	same legal effect.	as if made under o	oath: that I am an office:	r or director