


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90082 045 ***150.00

DOCUMENT # H09645 1. Entity Name WAYBRIGHT REAL ESTATE, INC.																																																											
Principal Place of Business 5445 W OAK PARK BLVD HOMOSASSA FL 34446 US			Mailing Address 5445 W OAK PARK BLVD HOMOSASSA FL 34446 US																																																								
2. Principal Place of Business - No P.O. Box # 110 NE Crystal Street Suite, Apt. #, etc.		3. Mailing Address 110 NE Crystal Street Suite, Apt. #, etc.																																																									
City & State Crystal River, FL Zip Country 34428 Citrus		City & State Crystal River, FL Zip Country 34428 Citrus		4. FEI Number 59-2433945 Applied For <input type="checkbox"/> Not Applicable																																																							
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																											
6. Name and Address of Current Registered Agent WAYBRIGHT, PATRICIA ANN 5445 W OAK PARK BLVD HOMOSASSA FL 34446			7. Name and Address of New Registered Agent Name Melanie Lynn Bartley Street Address (P.O. Box Number is Not Acceptable) 110 NE Crystal Street City Crystal River FL Zip Code 34428																																																								
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 <u><i>Melanie Lynn Bartley</i></u> (NOTE: Registered Agent signature required when reinstating) DATE _____																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. <input type="checkbox"/> Added to Fees																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td>P WAYBRIGHT, PATRICIA ANN 5445 W OAK PARK BLVD HOMOSASSA FL 34446</td> <td></td> <td></td> <td>Pres Melanie Lynn Bartley 110 NE Crystal Street Crystal River, FL 34428</td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td></td> <td>VP/Sec Stephanie Ann Price 110 NE Crystal Street Crystal River, FL 34428</td> <td style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td></td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	<input checked="" type="checkbox"/> Delete	TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		P WAYBRIGHT, PATRICIA ANN 5445 W OAK PARK BLVD HOMOSASSA FL 34446			Pres Melanie Lynn Bartley 110 NE Crystal Street Crystal River, FL 34428				<input type="checkbox"/> Delete		VP/Sec Stephanie Ann Price 110 NE Crystal Street Crystal River, FL 34428	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition			<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Melanie Lynn Bartley*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Waybright Real Estate, Inc.



Patricia Ann Waybright, GRI, President
Licensed Real Estate Broker

ATTACHMENT
40014030

H09645

REALTOR®

7449 W. Gulf to Lake Hwy., Suite 7

Crystal River, FL 34429

Telephone: (352) 795-1600

Fax: (352) 563-9823

February 1, 2007

Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RE: Waybright Real Estate Inc., a Florida Corporation;

Mrs. Thelma Lewis:

Enclosed herewith please find the 2007 for Profit Corporation Annual Report.

I am also enclosing our check made payable to you in the amount of \$150.00 for said filing fees.

Pursuant to our discussion, it is my understanding that in filing the annual report, that it will take the place of some of the amendments we previously filed and you are holding for additional monies.

If you have any questions whatsoever, please do not hesitate to contact our office at the above address or telephone numbers.

Sincerely,

A handwritten signature in cursive script that reads 'Stephanie A. Price'.

Stephanie A. Price,
V. President & Secretary

Enclosures