

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10536

FILED
Jan 21, 2009
Secretary of State

Entity Name: CAREY REALTY MANAGEMENT, INC.

Current Principal Place of Business:

3511 S. PENINSULA DR.
PORT ORANGE, FL 32127

New Principal Place of Business:

3280 S. ATLANTIC AVENUE
SUITE A
DAYTONA BEACH SHORES, FL 32118 US

Current Mailing Address:

3511 S. PENINSULA DR.
PORT ORANGE, FL 32127

New Mailing Address:

3280 S. ATLANTIC AVENUE
SUITE A
DAYTONA BEACH SHORES, FL 32118 US

FEI Number: 59-2436755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER, LYNN CAREY
3511 S. PENINSULA DR.
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

BECKER, LYNN CAREY
3280 S. ATLANTIC AVENUE
SUITE A
DAYTONA BEACH SHORES, FL 32118 US

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.

SIGNATURE:

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BECKER, LYNN C
Address: 3511 S. PENINSULA DR.
City-St-Zip: PORT ORANGE, FL 32127

Title: DVP () Delete
Name: BECKER, LYNN C
Address: 3511 S. PENINSULA DR.
City-St-Zip: PORT ORANGE, FL 32127

Title: DT () Delete
Name: BECKER, LYNN C
Address: 3511 S. PENINSULA DR.
City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BECKER, LYNN C
Address: 3280 S. ATLANTIC AVENUE
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: DVP (X) Change () Addition
Name: BECKER, LYNN C
Address: 3280 S. ATLANTIC AVENUE
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: DT (X) Change () Addition
Name: BECKER, LYNN C
Address: 3280 S. ATLANTIC AVENUE
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNN C. BECKER

DP

01/21/2009

Electronic Signature of Signing Officer or Director

Date