## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## **FILED** Apr 26, 2007 08:00 All Secretary of State DOCUMENT# H12293 1. Entity Name -FORBES REALTY INC. Principal Place of Business Mailing Address 1741 COLONIAL BLVD 1741 COLONIAL BLVD FT. MYERS FL 33907 FORT MYERS FL 33907 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suito, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) Applied For 4. FEI Number City & State City & State 59-2423695 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FORBES, RAYMOND J. Street Address (P.O. Box Number is Not Acceptable) 381 NORWOOD CT.,STE.1-A FORT MYERS FL 33919 Zip Code 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 Signature, typed or printed name or registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS Change Addition ☐ Delete 100 11111 FORBES, RAYMOND J. NAME NAME U00000734597 05/09/07-80132-007 150.00 381 NORWOOD CT. STREET ADDRESS STREET ADDRESS FORT MYERS FL CITY+ S1- ZIP Cdy-st-7P ☐ Change Addition ☐ Delete mu SIDS FORBES, JOYCE E. NAME NAMI. 381 NORWOOD CT. STREET ADDRESS STREET ADDRESS FORT MYERS FL CITY-S1-7IP CUY-ST-7IP □ Change Addition Delete TITLE 1011 NAMI NAME STREET ADDRESS STREET ADDRESS CHY-SI-7IP CIDY+31+70 Addition ☐ Dalete THE Change Dist NAME NAME STREET ADDRESS STREET ADDRESS C(1Y+ST-7)P CHY-SI-ZIP Delete ☐ Addition TITLE TITLE NAME NAME STRUCT ADDRESS STREET ADDRESS CHY-ST-7IP CHY-S1-7IP Addition HH Change Delete HIII NAME NAME. STREET ADDRESS STRUET ADDRESS CHY+SI-7IP CHY-S1-7P 12. I hereby certify that the information supplied with this filling 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 offect as if made under oath, that I am an officer or director of the corporation or the receiver or trustoc 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 attack ment with an address, with all other like empowered.

SIGNATURE