

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H12491

FILED
Dec 22, 2009
Secretary of State**Entity Name:** DECCA REAL ESTATE CORPORATION**Current Principal Place of Business:**8960 SW 89TH AVENUE
OCALA, FL 34481 US**New Principal Place of Business:**8960 SW HWY 200
SUITE 1
OCALA, FL 34481 US**Current Mailing Address:**8960 SW 89TH AVENUE
OCALA, FL 34481 US**New Mailing Address:**8960 SW HWY 200
SUITE 1
OCALA, FL 34481 US**FEI Number:** 59-2616172**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GHUMMAN, PRIYA
8960 SW 89TH AVENUE
OCALA, FL 34481 US**Name and Address of New Registered Agent:**GHUMMAN, PRIYA
8960 SW HWY 200
SUITE 1
OCALA, FL 34481 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:

12/22/2009

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: P D () Delete
Name: GHUMMAN, PRIYA
Address: 8960 SW 89TH AVENUE
City-St-Zip: Ocala, FL 34481 US

Title: ST () Delete
Name: OLSON, CAROL M
Address: 8960 SW 89TH AVENUE
City-St-Zip: Ocala, FL 34481 US

Title: VP D () Delete
Name: FUHR, AYESHA
Address: 8960 SW 89TH AVENUE
City-St-Zip: Ocala, FL 34481

Title: D () Delete
Name: SLAUGHTER, SHAANA
Address: 8960 SW 89TH AVENUE
City-St-Zip: Ocala, FL 34481

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P D (X) Change () Addition
Name: GHUMMAN, PRIYA
Address: 8960 SW HWY 200 SUITE 1
City-St-Zip: Ocala, FL 34481 US

Title: ST (X) Change () Addition
Name: OLSON, CAROL M
Address: 8960 SW HWY 200 SUITE 1
City-St-Zip: Ocala, FL 34481 US

Title: VP D (X) Change () Addition
Name: FUHR, AYESHA
Address: 8960 SW HWY 200 SUITE 1
City-St-Zip: Ocala, FL 34481

Title: D (X) Change () Addition
Name: SLAUGHTER, SHAANA
Address: 8960 SW HWY 200, SUITE 1
City-St-Zip: Ocala, FL 34481

Title: AS () Change (X) Addition
Name: PETTICREW, JAMES E BROKER
Address: 8960 SW HWY 200, SUITE 1
City-St-Zip: Ocala, FL 34481

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: CAROL M OLSON

ST

12/22/2009

Electronic Signature of Signing Officer or Director_____
Date