

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 13, 2006
Secretary

DOCUMENT # H20120 1. Entity Name ERIC GLEATON REALTY, INC.		
Principal Place of Business 102 E. 9 MILE RD. PENSACOLA, FL 32534	Mailing Address 102 E. 9 MILE RD. PENSACOLA, FL 32534	
<h2 style="margin: 0;">DO NOT WRITE IN THIS SPACE</h2>		
6. Name and Address of Current Registered Agent GLEATON, ERIC L. 102 E. 9 MILE RD. PENSACOLA, FL 32534		
<h2 style="margin: 0;">DO NOT WRITE IN THIS SPACE</h2>		
5. 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD GLEATON, ERIC L. 5468 CHAMPIONS DR. PACE, FL 32571	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Eric Gleaton</u> 2-10-06 850 477 5908 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		



02102006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2460579	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

U00000431760
02/23/06-80039-023 150.00

DO NOT WRITE
IN THIS SPACE

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SIGNATURE: James H. de Vries **1-31-06** **(950) 682-5819**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #