


2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J28889		
1. Entity Name HC&L REAL ESTATE INVESTMENT COMPANY, INC.		
Principal Place of Business C/O HARRY L. REDD 2727 APALACHEE PARKWAY TALLAHASSEE, FL 32301	Mailing Address C/O HARRY L. REDD 2727 APALACHEE PARKWAY TALLAHASSEE, FL 32301	

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06 APR 27 AM 10:32
TALLAHASSEE, FLORIDA



04182006 No Chg-P CR2E034 (11/05)

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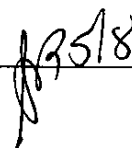
4. FEI Number 59-2732375	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent REDD, HARRY L. 2727 APALACHEE PARKWAY TALLAHASSEE, FL 32301
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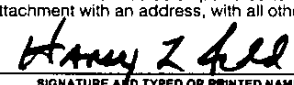
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>

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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP REDD, HARRY L. 2648 LUCERNE DR. TALLAHASSEE, FL
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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:  Harry L. Redd 4-25-06	850-878-6189
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>