

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J35192

FILED
Apr 04, 2005
Secretary of State

Entity Name: BAXTER'S REALTY, INC.

Current Principal Place of Business:

4049 LAFAYETTE ST
MARIANNA, FL 32446 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 938
MARIANNA, FL 32447 US

New Mailing Address:

FEI Number: 59-1387109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLOAN, DAVID M
2535 SPRING CREEK RD
MARIANNA, FL 32448 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SLOAN, DAVID M
Address: 2535 SPRING CREEK RD
City-St-Zip: MARIANNA, FL

Title: PD () Delete
Name: SLOAN, KATHY,
Address: 2535 SPRING CREEK ROAD
City-St-Zip: MARIANNA, FL

Title: STD () Delete
Name: BAXTER, DOROTHY
Address: 2600 BEVIA RD
City-St-Zip: MARIANNA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: SLOAN, KATHY
Address: 2535 SPRING CREEK ROAD
City-St-Zip: MARIANNA, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KATHY SLOAN

PD

04/04/2005

Electronic Signature of Signing Officer or Director

Date