

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

|                                                                  |  |                                                                                   |
|------------------------------------------------------------------|--|-----------------------------------------------------------------------------------|
| DOCUMENT # J56850                                                |  |  |
| 1. Entity Name<br>THE REAL ESTATE BOOK OF THE FLORIDA KEYS, INC. |  |                                                                                   |

Principal Place of Business  
81167 OVERSEAS HWY  
ISLAMORADA, FL 33036 US

Mailing Address  
P.O. BOX 292  
ISLAMORADA, FL 33036 US

06 APR 28 PM 4:23

64/12/06 90338 046 150.00



DO NOT WRITE IN THIS SPACE

05032006 No Chg-P CR2E034 (11/05)

|                                                                                          |                                                        |
|------------------------------------------------------------------------------------------|--------------------------------------------------------|
| 4. FCI Number<br>59-2809143                                                              | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |                                                        |

## 6. Name and Address of Current Registered Agent

PAUROWSKI, PEGGY ANN  
82990 OVERSEAS HWY  
LOT 30 PEN KEY CLUB  
ISLAMORADA, FL 33036

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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

Signature typed or printed name of registered agent and the filer (applicable)

(NOTE: Registered Agent signature required when transferring)

DATE

FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2006

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

|                |                      |
|----------------|----------------------|
| TITLE          | PD                   |
| NAME           | PAUROWSKI, PEGGY ANN |
| STREET ADDRESS | PO BOX 292           |
| CITY-ST-ZIP    | ISLAMORADA, FL 33036 |
| TITLE          |                      |
| NAME           |                      |
| STREET ADDRESS |                      |
| CITY-ST-ZIP    |                      |
| TITLE          |                      |
| NAME           |                      |
| STREET ADDRESS |                      |
| CITY-ST-ZIP    |                      |
| TITLE          |                      |
| NAME           |                      |
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| CITY-ST-ZIP    |                      |
| 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 or without other like empowered.

SIGNATURE:

*Peggy Paurowski*  
Typed or printed name of signing officer or director

*5/10/06*  
Date

*305-664-0558*  
Daytime Phone #