2006 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT DOCUMENT # J90130 1. Entity Name 06 APR 27 ANTH: 07 DEMETREE-PASCO PROPERTIES, INC. Principal Place of Business Mailing Address 3740 BEACH BLVD., SUITE #300 3740 BEACH BLVD., SUITE #300 P.O. BOX 47050 P.O. BOX 47050 JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32207 No Chg-P CR2E034 (11/05) 02212006 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2869326 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DEMETREE, JACK C., JR. DO NOT WRITE 3740 BEACH BLVD. **SUITE #300** IN THIS SPACE JACKSONVILLE, FL 32207 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 title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS CD TITLE DEMETREE, JACK C. NAME STREET ADDRESS 3740 BEACH BLVD #300 CITY-ST-ZIP JACKSONVILLE, FL 900074148829 05/08/06--01015--006 **450.00 VSD TITLE DEMETREE, MARK C. NAME 3740 BEACH BLVD #300 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL PTD TITLE DEMETREE, JACK C., JR. NAME STREET ADDRESS 3740 BEACH BLVD #300 DO NOT WRITE CITY-ST-ZIP JACKSONVILLE, FL IN THIS SPACE TITLE DEMETREE, CHRISTOPHER C. NAME STREET ADDRESS 3740 BEACH BLVD #300 JACKSONVILLE, FL CITY-ST-ZIP DUNN, M. HARRIS NAME 3740 BEACH BLVD #300 STREET ADDRESS JACKSONVILLE, FL CITY-ST-ZIP

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 it changed, or on an attachment with an address with a other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/06

Daytime Phone #