2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K02704

City-St-Zip:

FILED Jan 16, 2006 Secretary of State

Entity Nar	ne: FREEWHI	EELER REALTY, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	ERSEAS HIGHN NDA, FL 33036	VAY US					
Current Mailing Address:			New Mailing Address:				
	FICE BOX 1634 ADA, FL 33036	US					
FEI Number:	65-0013747	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()		
Name and	Address of Co	ırrent Registered Agent:	Name and	Address of N	lew Registered Agent:		
	R, ALEXA ERSEAS HWY ADA, FL 33036	US					
	named entity so of Florida.	ubmits this statement for the p	urpose of changing i	ts registered o	ffice or registered agent, or both,	ı	
SIGNATUR	RE:						
	Electroni	c Signature of Registered Age	ent		Date		
Election Car	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PST () WHEELER, ALE 85992 OVERSE/ ISLAMORADA, F	AS HIGHWAY	Title: Name: Address: City-St-Zip:	PD (X WHEELER, AL 85992 OVERSI ISLAMORADA,	EAS HIGHWAY		
Title: Name: Address: City-St-Zip:	VP () ELKOURY, JOHI 85992 OVERSE/ ISLAMORADA, F	AS HWY	Title: Name: Address: City-St-Zip:	VPD (X ELKOURY, JOH 85992 OVERSE ISLAMORADA,	EAS HWY		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	SD () WHEELER, RO 85992 OVERSI ISLAMORADA,	EAS HWY		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	TD () WHEELER, CH 85992 OVERSE ISLAMORADA,	EAS HWY		
Title: Name: Address:	()	Delete	Title: Name: Address:	VPD () WHEELER, DA 85992 OVERSI			

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

City-St-Zip: ISLAMORADA, FL 33036 US

SIGNATURE: ALEXA L. WHEELER Ρ 01/16/2006