## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K58506

1. Entity Name SADDLEBROOK REALTY, INC.

Principal Place of Business

5700 SADDLEBROOK WAY

Mailing Address

5700 SADDLEBROOK WAY

**FILED** Apr 30, 2007 08:00 A Secretary of State

WESLEY CHA	PEL, FL 33543-4499 US V	VESLEY CHAPEL, FL 33543-4	499 US	 !			
D	O NOT WRITE II	CE	03192007  4. FEI Numbe 59-2931	No Chg-P	CR2E034 (11/05)  Applied For Not Applicat  \$8.75 Additional Fee Required		
	6. Name and Address of Current Regis	stered Agent	·				
5700 SADI	GREGORY R. DLEBROOK WAY CHAPEL, FL 33543	DO NOT WRITE IN THIS SPACE					
the obligati	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or regist	tered agent, or both	n, in the State of Flo	orida. I am f	amiliar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	Agent signature required when reinstating) DATE					
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	cing \$	5.00 May Be dded to Fees				
TITLE	OFFICERS AND DIREC	CTORS	1				
NAME STREET ADDRESS CITY-ST-ZIP	DEMPSEY, THOMAS L. 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL						1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FAHEY, JOHN 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL		000000741445 05/15/07-80028-025 150.00 <b>DO NOT WRITE</b>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RIEHLE, GREGORY 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALLEN, DONALD 5700 SADDLEBROOK WAY WESLEY CHAPEL, FL			IN T	THIS SF	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS 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 of 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.

SI	G	N	Δ٦	R	F:

PED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/07

813-907-4481

Date

Daytime Phone #