## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # L06359

1. Entity Name CARON REALTY, INC.



FILED Jan 07, 2008 08:00 A Secretary of State

Daytime Phone #

Principal Place of Business 2100 CONSTITUTION BLVD. STE 122 SARASOTA, FL 34231 Mailing Address P.O. BOX 15672 SARASOTA, FL 34231



## DO NOT WRITE IN THIS SPACE

01042008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0133352

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARON, VERONICA R 2100 CONSTITUTION BLVD SUITE 122 SARASOTA, FL 34231

SIGNATURE: 4

## DO NOT WRITE IN THIS SPACE

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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 bite if applicable (NOTE: Registered Agent signature required when reinstating)  DATE					
FILE NOWI!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Trust Fund Contrib			icing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARON, VERONICA R 2100 CONSTITUTION BLVD STE 122 SARASOTA, FL 34231		U00000774381 01/07/08-80012-019 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					91/91/00 00012 010 100100
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-S1-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 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 all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR