2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 09, 2008 08:00 Al Secretary of State DOCUMENT # M82615 FIRST LANDMARK REALTY, INC. Mailing Address Principal Place of Business P.O. BOX 3041 721 NW SUNSET DRIVE STUART, FL 34995 STUART, FL 34994 CR2E034 (11/05) 01112008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0057726 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GIACOBBE, FRANK J. 721 NW SUNSET DRIVE STUART, FL 34994 IN THIS SPACE 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS HILE GIACOBBE, FRANK NAME STREET ADDRESS 721 NW SUNSET DRIVE *U00000887977 STUART, FL 34994 CITY - ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7P IN THIS SPACE HILE NAME STREET ADDRESS City-S1-7iP TITLE NAME STREET ADDRESS CITY - ST - ZiP TITLE NAME STREET ADDRESS

12. Thereby 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 attachnien with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED