2005 FOR PROFIT CORPORATION

Jul 18, 2005 08:00 AM Secretary of State ANNUAL REPORT. DOCUMENT # M83574 1. Entity Name P. & R. MID-FLORIDA REALTY SERVICES, INC. Mailing Address Principal Place of Business - 3 W LEMON ST 3 W LEMON ST P O BOX 238 BEVERLY HILLS, FL 34465 BEVERLY HILLS, FL 34465 No Chg-P CR2E034 (10/03) 07132005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2895222 Not Applicable \$8.75 Additional Fee Required 5. Certificate of Status Desired П 6. Name and Address of Current Registered Agent MYERS, PATRICIA M. DO NOT WRITE 7655 W. GULF TO LAKES HWY 12 CRYSTAL RIVER, FL 32629 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. 07/18/05-80008-021 150.00 SIGNATURE. (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 OFFICERS AND DIRECTORS 10. TITLE PROULX, KAREN NAME 4750 W PONTIAC PLACE STREET ADDRESS BEVERLY HILLS, FL CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TIT! E STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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:

CITY-ST-78 TITLE NAME STREET ADDRESS CITY-ST-ZIP

NCER OR DIRECTOR

FILED