


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 08, 2007 08:00 AM
Secretary of State

DOCUMENT # N99000004065 1. Entity Name FILM COMMISSION OF REAL FLORIDA, INC.	
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Principal Place of Business 1025 SW 1ST AVE SUITE B OCALA, FL 34474	Mailing Address 1025 SW 1ST AVE SUITE B OCALA, FL 34474
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03062007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3606243	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent POTAPOW, KITTY 6383 SE 21ST COURT RD OCALA, FL 34474

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD POTAPOW, KITTY 6383 SE 21CT RD OCALA, FL 34474
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	EVDP BOB, CUBBAGE P. O. BOX 607 DUNNELLON, FL 34430
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VPD PLATT, HERBERT M 10626 SW 12TH TERRACE MICANOPY, FL 32667
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD HUNT, REBECCA 4001 SW 13TH STREET GAINESVILLE, FL 32608
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	T POTAPOW, KITTY 6383 SE 21ST COURT ROAD OCALA, FL 34474
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

<p>U00000660399 03/19/07-80024-010 61.25</p> <p>DO NOT WRITE IN THIS SPACE</p>

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 617, 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: Mary Rita Potapow 3/7/07 352-817-3345
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #