## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P0000001633

Address:

City-St-Zip:

400 WILLIAM ST.

FORT WALTON BEACH, FL 32547

FILED Jan 25, 2006 Secretary of State

Entity Nai	me: ROSEW	OOD REALTY, INC.				
Current P	rincipal Place	e of Business:	New Principal Place of Business:			
	ESTHER BLY THER, FL 325					
Current M	lailing Addre	ss:	New Mailing Address:			
	ESTHER BLY THER, FL 325					
FEI Number	: 59-3616916	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desire	ed ( )
Name and	Address of (	Current Registered Agent:	Name and	Address of	New Registered Agent:	
SUITE 308	ESTER BLVI					
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent,	or both,
SIGNATUR	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D ( JUDKINS, JAN 2633 BLACK G NAVARRE, FL	SUM ROAD	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ROSE, JOYCE P O BOX 1612		Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BURNS, ROBE 943 EMILY CI		Title: Name: Address: City-St-Zip:	MILONAS, DE 496 PARISH		
Title: Name: Address: City-St-Zip:	O ( WRIGHT, MAR 405 LARKSPU NICEVILLE, FL	R CT.	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name:	O (X LYNCH, DAVIE	() Delete ) E	Title: Name:	(	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JANE M. JUDKINS SECY 01/25/2006