

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000026821

1. Entity Name
APOPKA REALTY, INC.



Principal Place of Business

1655 E SEMORAN BLVD.
SUITE 1
APOPKA, FL 32703

Mailing Address

1655 E SEMORAN BLVD.
SUITE 1
APOPKA, FL 32703



01242006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3641795

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARPER, DONITA
911 THOMPSON ROAD
APOPKA, FL 32712

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HARPER, DONITA
STREET ADDRESS	911 THOMPSON ROAD
CITY-ST-ZIP	APOPKA, FL 32712
TITLE	D
NAME	HARPER, JACK SR.
STREET ADDRESS	911 THOMPSON ROAD
CITY-ST-ZIP	APOPKA, FL 32712
TITLE	D
NAME	HARPER, JACK JR.
STREET ADDRESS	911 THOMPSON ROAD
CITY-ST-ZIP	APOPKA, FL 32712
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/03/06-80039-019 150.00

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IN THIS SPACE**

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:

Donita Harper - Donita Harper

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/06 407-389-6363

Date

Daytime Phone