2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000082968

City-St-Zip:

FORT LAUDERDALE, FL 33301

Entity Name: FAZIO PROPERTIES, INC.

FILED Mar 16, 2007 Secretary of State

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Current P	rincipal Place	e of Business:	New Principal Place o	New Principal Place of Business:	
	DREWS AVE	NUE			
SUITE 500) JDERDALE, F	1 22201			
	·				
Current M	lailing Addres	ss:	New Mailing Address	:	
	DREWS AVE	NUE			
SUITE 500 FORT LAUDERDALE, FL 33301					
	: 65-1059155	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
633 S. ANI SUITE 500	ILD, QUINN F DREWS AVEN) JDERDALE, F				
The above in the State	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
		_			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title:	*) Delete	Title: Name:	() Change () Addition	
Name: Address:	GOODCHILD, 633 S. ANDRE	QUINN WS AVE 5TH FL	Name: Address:		
City-St-Zip:		RDALE, FL 33301	City-St-Zip:		
Title:	٧ () Delete	Title:	() Change () Addition	
Name:	FAZIO, D. FRE	DRICO	Name:		
Address:		WS AVE, 5TH FLOOR	Address:		
City-St-Zip:	FORT LAUDER	RDALE, FL 33301	City-St-Zip:		
Title:) Delete	Title:	() Change () Addition	
Name:		G. BRADLEY II	Name:		
Address:	633 S ANDRE	WS AVE 5TH FLOOR	Address:		

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.

City-St-Zip:

SIGNATURE: QUINN F. GOODCHILD MGR 03/16/2007