

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000103368

FILED  
Jan 16, 2008  
Secretary of State

Entity Name: SELLSTATE ACHIEVERS REALTY NETWORK, INC.

## Current Principal Place of Business:

7431 COLLEGE PARKWAY  
A  
FORT MYERS, FL 33907

## New Principal Place of Business:

## Current Mailing Address:

12800 UNIVERSITY PARK DR.  
575  
FORT MYERS, FL 33907

## New Mailing Address:

14060 METROPOLIS AVE  
SUITE 1  
FORT MYERS, FL 33912

FEI Number: 65-1053446

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CRESSWELL, NEIL PSTD  
12800 UNIVERSITY DRIVE  
#575  
FT MYERS, FL 33907 US

## Name and Address of New Registered Agent:

CRESSWELL, NEIL PSTD  
14060 METROPOLIS AVE  
SUITE 1  
FT MYERS, FL 33912 US

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.

SIGNATURE: NEIL CRESSWELL

01/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: CRESSWELL, NEIL J  
Address: 12800 UNIVERSITY DRIVE 575  
City-St-Zip: FORT MEYRS, FL 33907

Title: VP ( ) Delete  
Name: TREBING, RALF  
Address: 7431 COLLEGE PARKWAY, SUITE A  
City-St-Zip: FT MYERS, FL 33907

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: CRESSWELL, NEIL J  
Address: 14060 METROPOLIS AVE SUITE 1  
City-St-Zip: FORT MEYRS, FL 33912

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: NEIL CRESSWELL

P

01/16/2008

Electronic Signature of Signing Officer or Director

Date