


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 8:00 am
Secretary of State

03-16-2006 90227 006 ***150.00

DOCUMENT # P01000029202 1. Entity Name VATER & VATER REAL ESTATE CORP.					
Principal Place of Business 1023 RUSSELL DRIVE #3 HIGHLAND BEACH, FL 33487			Mailing Address 1023 RUSSELL DRIVE #3 HIGHLAND BEACH, FL 33487		
2. Principal Place of Business 14340-B Harbour Landing Suite, Apt. #, etc.		3. Mailing Address SAME AS # 2 Suite, Apt. #, etc.			
City & State FT. Meyers, FL Zip 33908		City & State FL Zip 33908		4. FEI Number 65-1089455	
Country USA		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. 350 E LAS OLAS BLVD STE 1600 FT LAUDERDALE, FL 33301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 CHARLENE VATER Vice Pres. DATE 2/28/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VATER, NORBERT 1023 RUSSELL DRIVE #3 HIGHLAND BEACH, FL 33487 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14340-B HARBOUR LANDINGS DRIVE FT. MEYERS, FL 33908	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VATER, CHARLENE 1023 RUSSELL DRIVE #3 HIGHLAND BEACH, FL 33487 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14340-B HARBOUR LANDINGS DRIVE FT. MEYERS, FL 33908	
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<div style="border: 2px solid black; padding: 5px; display: inline-block;"> RECEIVED MAR 06 2006 IRS-OSC </div>					
OGDEN, UT					
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: Charlene Vater CHARLENE VATER Vice Pres. 2/28/06 239-433-0566 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					