

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90027 039 ***150.00

DOCUMENT # P01000082181 1. Entity Name REAL ESTATE ASSET GROUP, INC.					
Principal Place of Business 144 COMMERCIAL WAY SPRING HILL, FL 34606			Mailing Address PO BOX 501 PORT RICHEY, FL 34673		
2. Principal Place of Business 4401 N. Suncoast Blvd		3. Mailing Address 			
Suite, Apt. #, etc. #666		Suite, Apt. #, etc. 			
City & State Crystal River, FL		City & State 			
Zip 34428		Country USA		4. FEI Number 59-3739347	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent RUSSO, THOMAS J 144 COMMERCIAL WAY SPRING HILL, FL 34606			7. Name and Address of New Registered Agent Name Russo, Thomas J. Street Address (P.O. Box Number is Not Acceptable) 4401 N. Suncoast Blvd. #666 City Crystal River FL Zip Code 34428		
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 DATE 2/22/06 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAVISON, JEFFREY K 144 COMMERCIAL WAY SPRING HILL, FL 34606	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD RUSSO, THOMAS J 144 COMMERCIAL WAY SPRING HILL, FL 34608	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVTB Russo, Thomas J. 4401 N. Suncoast Blvd. #66 Crystal River, FL 34428	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS Prewsser, Rose Mary 4401 N. Suncoast Blvd. #66 Crystal River, FL 34428	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Change ☐ Addition			
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:		Date 2/22/06 (727) 848-4100 Daytime Phone #			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					