

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90432 011 \*\*\*150.00

**DOCUMENT # P01000084070**

1. Entity Name

ONE WAY REALTY SERVICES INC.



Principal Place of Business

10106 S FEDERAL HWY  
PORT ST LUCIE, FL 34952

Mailing Address

10106 S FEDERAL HWY  
PORT ST LUCIE, FL 34952

**DO NOT WRITE IN THIS SPACE**



02202006 No Chg-P CR2E034 (11/05)

4. FEI Number  
65-1136290

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

STIERLIN, ELLEN  
1207 SE PALM BEACH ROAD  
PORT ST LUCIE, FL 34952

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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 ELLEN M STIERLIN Ellen M Stierlin 4-21-06  
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	P
NAME	STIERLIN, ELLEN M
STREET ADDRESS	1207 SE PALM BEACH ROAD
CITY-ST-ZIP	PORT ST LUCIE, FL 34952
TITLE	<del>VP</del> NOT AN OFFICER NEVER WAS
NAME	<del>STIERLIN, GEORGE J VP</del>
STREET ADDRESS	<del>1207 SE PALM BEACH ROAD</del>
CITY-ST-ZIP	<del>PORT ST LUCIE, FL 34952</del>
TITLE	PRESIDENT
NAME	ELLEN M STIERLIN
STREET ADDRESS	146 S.W. ESSEX DR
CITY-ST-ZIP	PORT ST LUCIE, FL 34984
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Ellen M Stierlin 4-20-06 172-344-0672  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #