

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000098507

FILED
Apr 24, 2007
Secretary of State

Entity Name: COSTA & ASSOCIATES REALTY, INC.

Current Principal Place of Business:

50 LEANNI WAY
D 5
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

50 LEANNI WAY
D 5
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 59-3749436 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSTA, JOHN
50 LEANNI WAY
D 5
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: COSTA, JOHN
Address: 50 LEANNI WAY D5
City-St-Zip: PALM COAST, FL 32137

Title: V () Delete
Name: COSTA, JOHN
Address: 50 LEANNI WAY
City-St-Zip: PALM COAST, FL 32137

Title: V () Delete
Name: MCCALL, ANGELA
Address: 50 LEANNI WAY
City-St-Zip: PALM COAST, FL 32137

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: COSTA, JOHN
Address: 50 LEANNI WAY
City-St-Zip: PALM COAST, FL 32137

Title: VP (X) Change () Addition
Name: MCCALL, ANGELA
Address: 50 LEANNI WAY
City-St-Zip: PALM COAST, FL 32137

Title: VP () Change (X) Addition
Name: COSTA, CINDY
Address: 50 LEANNI WAY
City-St-Zip: PALM COAST, FL 32137 US

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.

SIGNATURE: JOHN COSTA

P

04/24/2007

Electronic Signature of Signing Officer or Director

_____ Date