

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000001449

FILED
Mar 09, 2007
Secretary of State

Entity Name: ACTION RENTAL MANAGEMENT REALTY INC.

Current Principal Place of Business:

3279 S. SUNCOAST BLVD
HOMOSASASSA, FL 34448

New Principal Place of Business:

417 NE. 2ND STREET
CRYSTAL RIVER, FL 34429

Current Mailing Address:

3279 S. SUNCOAST BLVD
HOMOSASASSA, FL 34448

New Mailing Address:

P.O. BOX 129
CRYSTAL RIVER, FL 34423

FEI Number: 02-0534013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGER, MARIE E
3279 S. SUNCOAST BLVD
HOMOSASASSA, FL 34448 US

Name and Address of New Registered Agent:

HAGER, MARIE E
417 NE. 2ND STREET
CRYSTAL RIVER, FL 34429 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: MARIE E. HAGER

03/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAGER, MARIE E
Address: 3279 S. SUNCOAST BLVD
City-St-Zip: HOMOSASSA, FL 34448

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAGER, MARIE E
Address: 417 NE. 2ND STREET
City-St-Zip: CRYSTAL RIVER, FL 34429

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: MARIE E. HAGER

PRES

03/09/2007

Electronic Signature of Signing Officer or Director

Date