2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000009655

6. Name and Address of Current Registered Agent

1. Entity Name

LAWYERS REAL ESTATE, P.A.



Principal Place of Business

Mailing Address

112 W. NEW HAVEN AVE. MELBOURNE, FL 32901 112 W. NEW HAVEN AVE. MELBOURNE, FL 32901

FILED Jan 20, 2006 8:00 am Secretary of State

01-20-2006 90037 035 ***150.00

40004200



DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired

\$8.75 Additional Fee Required

BEAUDOIN, KAREN

112 W. NEW HAVEN AVE. MELBOURNE, FL 32901

DO	NOT	WRITE
IN '	THIS	SPACE

Date

Daytime Phone #

8. The above	named entity submits this statement for the r	ourpose of changing its re	l gistered office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
the obligations of registered agent.							
SIGNATURE 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 Financin Trust Fund Contribution.				\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST * WALDRON, TOM D ESQ 112 W. NEW HAVEN AVE. MELBOURNE, FL 32901						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR