## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with a

SIGNATURE:

## Jan 31, 2006 08:00 AM **Secretary of State** DOCUMENT # P02000014201 1. Entity Name REAL WOODS, INC. Mailing Address Principal Place of Business 1230 EAST AVE N 1230 EAST AVE N SARASOTA, FL 34237 SARASOTA, FL 34237 No Cha-P CR2E034 (11/05) 01172006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 71-0870875 Not Applicable The second secon \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent A STATE OF THE STA ALSUM, DARYL DO NOT WRITE 4964 HABANA DR SARASOTA, FL. 34235 IN THIS SPACE The same of the sa 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. The second secon TITLE ALSUM, DARYL NAME 不**是一种的人的** STREET ADDRESS 4964 HABANA DR CITY-ST-ZIP SARASOTA, FL 34235 TITLE 02/09/06-80040-021 15D.00 NAME STREET ADDRESS The state of the s CITY-ST-ZIP TITLE The state of the s NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP THIS SPACE TITLE NAME STREET ADDRESS - Control of the cont CITY-ST-ZIP Jana Karana K TITLE NAME The same of the sa STREET ADDRESS CITY-ST-719 TITLE NAME STREET ADDRESS COTY-ST-ZOP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or suppremental 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 tryistee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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