2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 01, 2006 8:00 am Secretary of State DOCUMENT # P02000077156 05-01-2006 90401 007 ***150.00 1. Entity Name HOME STRETCH REALTY, P.A. Principal Place of Business Mailing Address 40032 LLA 15410 PALMA LANE 15410 PALMA LANE WELLINGTON, FL 33414 WELLINGTON, FL 33414 04062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 13-4206766 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PRIOR, JOSEPH DO NOT WRITE 15410 PALMA LANE WELLINGTON, FL 33414 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. 1 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) 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. TITLE n PRIOR, JOSEPH NAME STREET ADDRESS 15410 PALMA LANE CITY-ST-ZIP WELLINGTON, FL 33414 TITLE NAME STREET ADDRESS CITY-ST-71P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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 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.

TITLE NAME STREET ADDRESS

SIGNING OFFICER OR DIRECTOR

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FILED