

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 22, 2005  
Secretary of State**

DOCUMENT# P02000085458

Entity Name: BCH REALTY, INC.

**Current Principal Place of Business:**

270 NORTHLAKE BLVD.  
SUITE 1004  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

270 NORTHLAKE BLVD.  
SUITE 1004  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

FEI Number: 81-0565879      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ESTES, THEODORE D ESQ.  
24 S ORANGE AVE  
ORLANDO, FL              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

**OFFICERS AND DIRECTORS:**

Title: DP              ( ) Delete  
Name: PIZZICA, FRANK  
Address: 270 NORTHLAKE BLVD., SUITE 1004  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: DST              ( ) Delete  
Name: HERRING, MARK C  
Address: 270 NORTHLAKE BLVD., SUITE 1004  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: DV              ( ) Delete  
Name: SULLIVAN, MIKE  
Address: 270 NORTHLAKE BLVD., SUITE 1004  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: SEC              (X) Delete  
Name: MATHENY, KATHY G  
Address: 270 NORTHLAKE BLVD., SUITE 1004  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARK C. HERRING

DST

07/22/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date