2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000096245

1. Entity Name JIM MASSEY REALTY, INC.



FILED Jan 24, 2008 08:00 A Secretary of State

Principal Place of Business

5724 DORAL DRIVE SARASOTA, FL 34243 Mailing Address

5724 DORAL DRIVE SARASOTA, FL 34243



CR2E034 (11/05)

Daytime Phone #

DO NOT WRITE IN THIS SPACE

Applied For 4. FEI Number 03-0482337 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered.

MILE THOUSEN OF ME AND THE STATE OF STREET OF DIRECTOR

SIGNATURÈ

HOPKINS, F. THOMAS ICARD, MERRILL, CULLIS, TIMM, FUREN P.A. 2033 MAIN STREET, SUITE 600 SARASOTA, FL 34237

DO NOT WRITE IN THIS SPACE

No Chg-P

01112008

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.					
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, 2008 Fee will be \$550.00 9. Election Campaign Fine Trust Fund Contribution				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASSEY, JAMES A 5724 DORAL DRIVE SARASOTA, FL 34243				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000795673 01/29/08-80001-006 158.75
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					

JAMES