2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117575

Title:

Name:

Address:

City-St-Zip:

FILED Jul 21, 2006 Secretary of State

Entity Name: DEPOT PROPERTIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 19012 1ST ST SW 414 ASHFORD DRIVE LUTZ, FL 33548 BRANDON, FL 33511 **Current Mailing Address: New Mailing Address:** 19012 1ST ST SW 414 ASHFORD DRIVE LUTZ, FL 33548 BRANDON, FL 33511 FEI Number: 22-3881430 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHULER, SOLOMON 1505 N FLORIDA AVE. TAMPA, FL 33602 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition LONG, JEROLD E LONG, JEROLD E Name: Name: 19012 1ST ST SW 414 ASHFORD DRIVE Address: Address: City-St-Zip: LUTZ, FL 33548 City-St-Zip: BRANDON, FL 33511 Title: Title: (X) Change () Addition DST () Delete DST HENTSCHEL, GREGOR E HENTSCHEL, GREGOR E Name: Name: 19012 1ST ST. S.W. 2917 FORRESTWOOD DRIVE Address: Address: LUTZ, FL 33548 SEFFNER, FL 33584 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition PIERCEFIELD, DAYNE R PIERCEFIELD, DAYNE R Name: Name: 19012 1ST ST. S.W. 9911 DOMINGO DRIVE Address: Address: City-St-Zip: LUTZ, FL 33548 City-St-Zip: BROOKSVILLE, FL 34601

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JEROLD E. LONG PRES 07/21/2006

(X) Delete

WOODS, STEVEN M

19012 ST. SW

LUTZ, FL 33548

() Change () Addition