

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000124465

FILED
Mar 13, 2006
Secretary of State

Entity Name: SPANISH TRAILS WEST REALTY, INC.

Current Principal Place of Business:

7142 PISCINA STREET
ZEPHYRHILLS, FL 33541

New Principal Place of Business:

Current Mailing Address:

7142 PISCINA STREET
ZEPHYRHILLS, FL 33541

New Mailing Address:

FEI Number: 56-2338053 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDON, SCOTT E
240 S PINEAPPLE AVE
SARASOTA, FL 34236 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEDRONSKY, JOSEPH
Address: 7142 PISCINA STREET
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: V () Delete
Name: FOURNIER, RONALD
Address: 7142 PISCINA STREET
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: S () Delete
Name: TRUSLEY, JIM
Address: 7142 PISCINA STREET
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: T () Delete
Name: MUNGER, DEAN
Address: 7142 PISCINA STREET
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: D () Delete
Name: HICKS, JOHN
Address: 7142 PISCINA STREET
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: AS () Delete
Name: GORMAN, WILLIAM
Address: 280 LA VISTA DR. W
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: BEECROFT, CAROL
Address: 7142 PISCINA STREET
City-St-Zip: ZEPHYRHILLS, FL 33541

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 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.

SIGNATURE: CASSIE CASTILLO

OFFI

03/13/2006

Electronic Signature of Signing Officer or Director

_____ Date