2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

AMENDED AN	INUAL REPU	٦	FILED	
DOCUMENT # P02000131046				: ILEU
1. Entity Name TERRY MCCUE REAL ESTATE, INC.			2007 OCT 10 PM 4: 26	
Principal Place of Business	Mailing Address		_ SEC!	RETARY OF STATE NHASSEE, FLORIDA
929 3RD ST NORTH	PO BOX 51283		· IALLA	HASSEE, FLORIDA
SUITE B Jacksonville Beach, FL 32250	JACKSONVILLE, FL 322	240		
Principal Place of Business - No P.O. Box # 3. Mailing Address			[4 1 1 1 1 1 1 1 1 1
Suite, Apt. #, etc. Suite, Apt. #, etc.			10022007 Chg-P	CR2E034 (12/06)
City & State	City & State		4, FEI Number 56-2329847	Applied For Not Applicable
. Zip Country	Zıp	Country	5. Certificate of Status Desire	ed S8.75 Additional Fee Required
6. Name and Address of Currel	nt Registered Agent		7. Name and Address of Ne	w Registered Agent
WILEY, CLAUDE S PRES/TR	Name C1	CITUE S WHEY PRISHIP		
929 3RD STREET NORTH		89 75 B	(P.Or box Numbler is Not Accept	able STEB
SUITE B JACKSONVILLE BEACH, FL 32250				
,		City C	k conville po	ach FL 222280
8. The above named entity submits this statement	for the purpose of changing its	registered office or registe	ered agent, or both, in the State o	f Florida. I am familiar with, and accept
ine obligation of Jegispered agent. Solvery and the college of the state of the st				
SIGNATURE Signature, typed or (Could name of registured age	ent and little if applicable. (NOT)	E. Register d'Agent s'gnalure require	ed when reinstating)	DATE DATE
		<u> </u>	<u> </u>	
Amended AR is \$61.25	9. Election Campa Trust Fund Cont		6.00 May Be ded to Fees	
10. OFFICERS AN	I ID DIRECTORS	11.		OFFICERS AND DIRECTORS IN 11
PRES PRES	☐ Delete	TITLE PC	e 5	□ Enange □ Addition
NAME WILEY, CLAUDE S PRES STREET ADDRESS 929 3RD STREET NORTH, SUITE B		NAME C1'STREET ABORESS	The S. wiky	UN TH STER
CITY-ST-ZIP JACKSONVILLE BEACH, FL 3	32250	UITY-SE-ZIP	ctsurville, f	132250
TREA	Delete		ec	☐ Strange ☐ Addition
NAME WILEY, CLAUDE S TREASUR STREET ADDRESS 929 3RD STREET NORTH, SU			ydes. Witey gard ST N	
CITY-ST-ZIP JACKSONVILLE BEACH, FL 3	32250	CITY-ST-ZIP	desonville	beach, 17 32250
TITLE VP NAME MCCUE, MELBA	☐ Delete	TITLE NAME		Change Addition
NAME MCCUE, MELBA STREET ADDRESS 724 CAMELLIA TERRACE DR	IVĖ	STREET ADDRESS		
CITY-ST-ZIP NEPTUNE BEACH, FL 32266		CITY - ST - ZIP		
TITLE NAME	Delete	TITLE SC	cretury	Change Addition
STREET ADDRESS		STREET ADDRESS	acely Ronce	CEPT NOT TH
CITY - ST- ZIP		CHY-SI-ZIP JA	CKSLANTIC	cach, FL 32250
TITLE NAME	Delete	. TITLE NAME		Change Addition
STREET ADDRESS		STREET ADDRESS	50010	9678705 026009 **52.50
CITY-ST-ZIP		CITY-ST-ZIP	03/50/0101	
TITLE NAME	☐ Delete	TITLE NAME		Change Addition
STREET ADDRESS		STREET ADDRESS	50010 1071170201	9678705 004002 **8.75
CITY-ST-ZIP		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 snall have the same legal effect as if made under oath; that I am an officer or director				
of the corporation or the receiver of 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.				
SIGNATURE: 10/0/07 904249721				
SIGNATURE AND TYPED ON PRINTED HOME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED ON PRINTED HOME OF SIGNING OFFICER OR DIRECTOR Daysterie Physics P.				

R 10-10-07