2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 03, 2006 08:00 AM Secretary of State

			. SAARATARY AT STATA
DOCUMENT # P02000133450 1. Entity Name LOWE REALTY GROUP, INC.			Secretary of State
ice of Business IST N SUITE 20 34103	Mailing Address 3988 UPOLO LANE NAPLES, FL 34119		R LEWINGER AN REINE WENN BENN DENN DENN DENN NERD WERE WORD WAR AND RANN BENNER HA FERE
		CE	D1202006 No Chg-P CR2E034 (11/05) 4. FEI Number
LOWE, ROBERT H 3988 UPOLO LANE NAPLES, FL 34119			DO NOT WRITE IN THIS SPACE
stions of registered agent. Signature, typed or printed name of registered agent and LE NOWILL FEE 13 \$150.00 Tay 1, 2008 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.	d Agent signature required	
PTS LOWE, ROBERT H 3988 UPOLO LANE NAPLES, FL 34119	RECTORS		04/14/06-80009-020 150.00
			DO NOT WRITE IN THIS SPACE
	REALTY GROUP, INC. Coe of Business IST N SUITE 20 34103 DO NOT WRITE 6. Name and Address of Current Re OBERT H DLO LANE FL 34119 e named entity submits this statement for the ations of registered agent. Signature, typed or printed name of registered agent, and Coefficients and Dr OFFICERS AND Dr PTS LOWE, ROBERT H 3988 UPOLO LANE	REALTY GROUP, INC. Real Business Mailing Address 3988 UPOLO LANE NAPLES, FL 34119 Control of Current Registered Agent Real Standard Address of Current Registered Agent Real Standard A	Mailing Address UST N SUITE 20 3988 UPDLO LANE NAPLES, FL 34119 DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent OBERT H DLO LANE FL 34119 e named ontity submits this statement for the purpose of changing its registered office or register ations of registered agent. Signature, typed or pithled name of registered agent and that if applicable. (NOTE, Registered Agent styrature required lay 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS PYS LOWE, ROBERT H 3988 UPOLO LANE

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 shall have the same legal effect as if made under each; that I am an officer or director of the corporation of the receiver or thrustee 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 lighter propowered.

ROPCLT N. LOWE,

PRES,

SIGNATURE:

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/06 239-5910-4949