2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 13, 2006 8:00 am Secretary of State 04-13-2006 90548 001 ***300.00 DOCUMENT # P03000007685 1. Entity Name BANKFIRST REALTY, INC. 66010021 Principal Place of Business Mailing Address 1031 W MORSE BLVD 1031 W MORSE BLVD SUITE 300 SUITE 300 WINTER PARK, FL 32789 WINTER PARK, FL 32789 03282006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 54-2174442 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **SWANN & HADLEY PA** DO NOT WRITE 1031 W MOSE BLVD SUITE 300 IN THIS SPACE WINTER PARK, FL 32789 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS D TITLE BARNES, JAMES T JR NAME STREET ADDRESS 1031 W MORSE BLVD, SUITE 300 CITY-ST-ZIP WINTER PARK, FL 32789 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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

FFICER OR DIRECTOR

SIGNATURE:

NAME STREET ADORESS CITY-ST-ZIP

James T. Barnes, Jr.

3/31/06

407-629-8466

FILED

Daytime Phone #