2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 21, 2008 08:00 All Secretary of State DOCUMENT # P03000034526 1. Entity Name MONTGOMERY REALTORS, INC. Principal Place of Business Mailing Address 1388 COUNTRY CLUB RD 1388 COUNTRY CLUB RD **GULF BREEZE, FL 32563** GULF BREEZE, FL 32563 02152008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 57-1157143 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MONTGOMERY, ROBERT B DO NOT WRITE 1388 COUNTRY CLUB RD GULF BREEZE, FL 32563 IN THIS SPACE 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 aignature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 U000000912443 Trust Fund Contribution. Added to Fees 05/07/08-80077-017 438.75 10. OFFICERS AND DIRECTORS **PSD** TITLE MONTGOMERY, ROBERT B NAME STREET ADDRESS 1388 COUNTRY CLUB RD CFIY-ST-ZP GULF BREEZE, FL 32563 VPSD TITLE WARD, SANDRA J STREET ADDRESS 8800 BURNING TREE RD CITY-ST-ZIP PENSACOLA, FL 32514 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP THLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 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 an address, with all other like empowered.

OFFICER OR DIRECTOR

SIGNATURE:

FILED