2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000087266

Address:

City-St-Zip:

11652 TANANGER DR

JACKSONVILLE, FL 32225

Entity Name: NE FLORIDA RESIDENTIAL SERVICES INC.

FILED Jan 04, 2006 Secretary of State

Linuty Na	ille. NETEC	NIDA NEOIDENTIAE	oliviolo,	II V O.			
Current Principal Place of Business:				New Princ	ipal Place	e of Business:	
	OTTMILL RD IVILLE, FL 32	2223					
Current Mailing Address:				New Mailing Address:			
	OTTMILL RD IVILLE, FL 32	2223					
FEI Number: 33-1066854 FEI Number Applied For ()			For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:		
	COTT OTTMILL RD IVILLE, FL 32						
	named entity e of Florida.	y submits this stateme	nt for the pu	rpose of changing i	ts register	ed office or registered agent, or both,	
SIGNATU							
	Electro	onic Signature of Regi	stered Agen	t		Date	
Election Car	mpaign Financi	ng Trust Fund Contribution	on ().				
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	LLOYD, SCO 10607 SCOT			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	O (CHASTAIN, A)Delete ARON		Title: Name:	O REEVES. I	(X) Change()Addition ROBERT	

Address:

City-St-Zip:

555 BIRD LANE

JACKSONVILLE, FL 32207

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: SCOTT LLOYD D 01/04/2006