


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000114856 1. Entity Name FIRST FLORIDA REAL ESTATE SPECIALISTS, INC.	
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Principal Place of Business 675 E. HWY. 50 CLERMONT, FL 34711	Mailing Address 675 E. HWY. 50 CLERMONT, FL 34711
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000000408131
02/08/06-80027-016 150.00



01212006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0384446	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent JORDAN, EDWARD P II 1460 EAST HWY. 50 CLERMONT, FL 34711

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CORDERO, MARIO 675 E. HWY. 50 CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GUADALUPE, ANTONIO 675 E. HWY. 50 CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GUADALUPE, ROSARIO 675 EAST HIGHWAY 50 CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CORDERO, SHELLY LYNN 675 E HWY 50 CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 empowered.

SIGNATURE:

Mario Cordero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-06 352-241-7000

Date

Daytime Phone #