

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000152539

Entity Name: WATSON COMMERCIAL REALTY, INC.

FILED
Jan 03, 2006
Secretary of State

Current Principal Place of Business:

9471 BAYMEADOWS RD.
JACKSONVILLE, FL 32256

New Principal Place of Business:

9471 BAYMEADOWS RD.
SUITE 207
JACKSONVILLE, FL 32256

Current Mailing Address:

7821 DEERCREEK CLUB RD
SUITE 200
JACKSONVILLE, FL 32256

New Mailing Address:

9471 BAYMEADOWS RD.
SUITE 207
JACKSONVILLE, FL 32256

FEI Number: 20-0741148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, WILLIAM A JR
7821 DEERCREEK CLUB RD
SUITE 200
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

CAPICCHIONI, PAUL P
9471 BAYMEADOWS RD.
SUITE 207
JACKSONVILLE, FL 32256 US

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.

SIGNATURE: PAUL P. CAPICCHIONI

01/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WATSON, WILLIAM A JR
Address: 7821 DEERCREEK CLUB RD
City-St-Zip: JACKSONVILLE, FL 32256

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAPICCHIONI, PAUL P
Address: 9471 BAYMEADOWS RD., SUITE 207
City-St-Zip: JACKSONVILLE, FL 32256

Title: S/T () Change (X) Addition
Name: LANDSCHOOT, CARLOTTA W
Address: 7821 DEERCREEK CLUB RD., SUITE 101
City-St-Zip: JACKSONVILLE, FL 32256

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: PAUL P. CAPICCHIONI

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01/03/2006

Electronic Signature of Signing Officer or Director

Date