

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90098 040 ***150.00

DOCUMENT # P04000032354

1. Entity Name
SURF & TURF REAL ESTATE, INC.



Principal Place of Business
1194 MAHOGANY MILL RD 1
PENSACOLA, FL 32507

Mailing Address
1194 MAHOGANY MILL RD 1
PENSACOLA, FL 32507

40047461



2. Principal Place of Business - No P.O. Box #
3480 BARRANCOAS AV.
Suite, Apt. #, etc.

3. Mailing Address
3480 BARRANCOAS AV.
Suite, Apt. #, etc.

01032007 Chg-P CR2E034 (12/06)

City & State
PENSACOLA FL
Zip
32507
Country
ESCAMBIA

City & State
PENSACOLA FL
Zip
32507
Country
USA
ESCAMBIA

4. FEI Number
43-2043082
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCCARTHY, SUZANNE W
1194 MAHOGANY MILL ROAD, UNIT #1
PENSACOLA, FL 32507

Name
MCCARTHY, SUZANNE W.
Street Address (P.O. Box Number is Not Acceptable)
3480 BARRANCOAS AV.
City
PENSACOLA FL Zip Code
32507

7. Name and Address of New Registered Agent

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 *James W. Hall Pres/Sec.*
Signature, typed or printed name of registered agent and fee if applicable

James W. Hall
(NOTE: Registered Agent signature required when: re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PS	<input type="checkbox"/> Delete
NAME	HALL, JERRY	
STREET ADDRESS	5646 GLENCREST BLVD	
CITY-ST-ZIP	TAMPA, FL 33625	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCCARTEY, SUZANNE W	
STREET ADDRESS	1194 MAHOGANY MILL ROAD, UNIT 1	
CITY-ST-ZIP	PENSACOLA, FL 32509	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCCARTHY, DALE C	
STREET ADDRESS	1194 MAHOGANY MILL ROAD, UNIT 1	
CITY-ST-ZIP	PENSACOLA, FL 32507	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	14810 Wedgewood Drive	
STREET ADDRESS	Tampa, FL 33613	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3480 Barrancas Ave.	
STREET ADDRESS	Pensacola FL.	
CITY-ST-ZIP	32507	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3480 Barrancas Ave.	
STREET ADDRESS	Pensacola FL.	
CITY-ST-ZIP	32507	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 empowerments.

SIGNATURE: X

James W. Hall
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/07/07

850-516-4148
Date Daytime Phone #