

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90442 021 \*\*\*150.00

DOCUMENT # P04000046896

1. Entity Name

CENTRAL FLORIDA REALTY ASSOCIATES,  
INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

13200 WILD DUCK CT

Suite, Apt. #, etc.

3. Mailing Address

13200 WILD DUCK CT

Suite, Apt. #, etc.

60031156

DO NOT WRITE IN THIS SPACE

City & State

ORLANDO, FL

City & State

ORLANDO, FL

4. FEI Number

20-0990153

Applied For

Not Applicable

Zip

32828

Country

ORANGE

Zip

32828

Country

ORANGE

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

ANDREA M. PERRY

Street Address (P.O. Box Number is Not Acceptable)

13200 WILD DUCK CT

City

ORLANDO

FL

Zip Code

32828

**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

*Andrea M. Perry*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/06

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

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	PRESIDENT ANDREA M. PERRY 13200 WILD DUCK CT. ORLANDO, FL 32828	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Andrea M. Perry*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/06

Date

(321) 276-9355

Daytime Phone #

CR2E034B (12/02)