2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000052061

F & C REAL ESTATE INVESTMENT CORP



FILED
Jan 25, 2008 08:00 AM
Secretary of State

Princ	inal	Plac	 f D	ı arii	200	b

, Mailing Address

2072 BISBEE ST - - - - - - - - PORT ST. LUCIE, FL 34952

2072 BISBEE ST

PORT ST. LUCIE, FL 34952



DO NOT WRITE IN THIS SPACE

01142008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-0927697 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

5. Name and Address of Current Registered Agent

DIFRUSCIO, FRED R 2072 BISBEE ST PORT ST. LUCIE, FL 34952

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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OATE												
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financi Trust Fund Contribution,	ing 🖂	\$5.00 May Be Added to Fees								
10.	OFFICERS AND DIREC	TORS										
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D. DIFRUSCIO, FRED R 2072 S.E. BISBEE ST. PORT ST. LUCIE, FL 34952											
NAME STREET ADDRESS CITY-ST-ZIP	VP/D DIFRUSCIO, CATHERINE 2072 S.E. BISBEE ST. PORT ST. LUCIE, FL 34952				U00000794303 01/28/08-80002-016 150.00							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE							
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 empowered.

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP

RED R. DIFRUSCIO

335-8401