2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000063995

Entity Name: ROSS INVESTMENT REAL ESTATE BROKERAGE, INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4304 LEE BLVD LEHIGH ACRES, FL 33971 LIS **Current Mailing Address: New Mailing Address:** 4304 LEE BLVD 10523 BELLA VISTA DRIVE LEHIGH ACRES, FL 33971 US FORT MYERS, FL 33913 US FEI Number: 20-1436444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: JEAN-PIERRE, HERVE TERZO, THOMAS S 4458 CLEVELAND AVE 10523 BELLA VISTA DRIVE US FORT MYERS, FL 33901 FORT MYERS, FL 33913 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: THOMAS S. TERZO 04/26/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MCGETTRICK, DANIEL R Name: Name: 4304 LEE BLVD Address: Address: City-St-Zip: LEHIGH ACRES, FL 33971 US City-St-Zip: VPD Title: Title: () Delete PD (X) Change () Addition Name: TERZO, LINDA J Name: TERZO, LINDA J 4304 LEE BLVD Address: 4304 LEE BLVD Address: LEHIGH ACRES, FL 33971 US LEHIGH ACRES, FL 33971 US City-St-Zip: City-St-Zip: Title: PD (X) Delete Title: () Change () Addition FRY, THOMAS C JR. Name: Name: 4304 LEE BLVD Address: Address: City-St-Zip: LEHIGH ACRES, FL 33971 US City-St-Zip: Title: TD () Delete Title: () Change () Addition HERMAN, CAROLYN Name: Name: Address: 4304 LEE BLVD Address: City-St-Zip: LEHIGH ACRES, FL 33971 US City-St-Zip: Title: **EVPD** Title: **EVPD** (X) Change () Addition () Delete Name: WIGGLESWORTH, JOHN Name: WIGGLESWORTH, JOHN 824 SE 47TH STREET - SUITE #1 Address: 2273 SE 27TH ST Address:

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.

City-St-Zip:

CAPE CORAL, FL 33904

SIGNATURE: THOMAS S. TERZO RA 04/26/2007

City-St-Zip:

CAPE CORAL, FL 33904