CTTY-ST-ZIP

2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 30, 2007 08:00 A Secretary of State **DOCUMENT # P04000080763** 1. Entity Name AROUND THE BAY REALTY, INC. Principal Place of Business Mailing Address **6731 FLICKER LN 6731 FLICKER LN** HUDSON, FL 34667 HUDSON, FL 34667 04272007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 84-1652191 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LICCIARDELLO, ROBERT DO NOT WRITE 6731 FLICKER LN HUDSON, FL 34667 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, typed or printed name of registered agent and titlo if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Added to Fees After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS PRES MRE LICCIARDELLO, CLARA NALE STREET ADDRESS 6731 FLICKER LN. CITY-ST-ZIP HUDSON, FL 34667 TITLE NALE STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MIF STREET ADDRESS CITY-ST-ZIP TITLE NAME U00000747034 STREET ADDRESS 05/17/07-80009-015 158.75 CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE:

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 eath; 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