## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 26, 2006 8:00 am Secretary of State 04-26-2006 90202 028 \*\*\*150.00

DOCUMENT # P04000081260  1. Entity Name SUNSEEKER REALTY OF SOUTHWEST FLORIDA, INC.						. D'3 (14 t			
Principal Place 428 PINO ISL CAPE CORAL,	AND ROAD	Mailing Address 428 PINO ISLAND ROAD CAPE CORAL, FL 33991	428 PINO ISLAND ROAD		\$008313.				
2. Principal Pl 428 Suite, Apt.	PINE TSLAND RO	3. Mailing Address 428 PINC J Suite. Apt. #, etc.	T <sub>SL A</sub>	NO RO		1951 M (2019 0 00)11		818 CHI 681	
<u> </u>		Ch. J. State			01112006	Chg-P	CR2E034	<u> </u>	P. 15
City & State		City & State		4. FEI Number 20-1142	879			plied For t Applicable	
Zip	Country Zip Co		Coun	try	5. Certificate of Status Desired See Reg				
	6. Name and Address of Current R	egistered Agent			7. Name and A	ddress of New			
WHETSELL, RONALD 428 PINE ISLAND ROAD 33991				Name Street Address (P.O. Box Number is Not Acceptable)					
CAPE CORAL, FL 33904				City				Zip Code	
	named entity submits this statement for	····			······································		FL	·	
SIGNATURE_	ions of registered agent  And A A A A A A A A A A A A A A A A A A	9. Election Campaig	n Finar		.00 May Be		DATE		<del></del>
	ay 1, 2006 Fee will be \$550.0	Trust Fund Contri	bution.	☐ Add	ded to Fees				
10	OFFICERS AND D		11.		ADDITIONS/C	HANGES TO OF			
HTLE NAME STREET ADDRESS CITY-ST-ZIP	HETSELL, RONALD 28 PINE ISLAND ROAD			į.	☐ Charge ☐ Add®i				
TITLE NAME STREET ADDRESS CRY-ST-ZP	D Delete WHETSELL, TERENCE 428 PINE ISLAND ROAD CAPE CORAL, FL 33991				☐ Change ☐ A				Addition
THILE NAME STREET ADDRESS GRY-SE-ZP	D DINGER, SAMUEL 428 PINE ISLAND ROAD CAPE CORAL, FL 33991	☐ Deleta						Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIF	CARROW PHIL 4711 S E 15TH AVENUE CAPE CORAL, FL 33904	Deleto						) Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MINGM ROBERTS, DAVID B 428 PINE ISLAND ROAD CAPE CORAL, FL 93991	Delete		i i				] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Deleta					Ξ	] Change	Addition

12. Thereby certify that the information supplied with this filling 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

| Contract NUMBER of STATUTE | Contract NUMBER of