2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000082189

Entity Name: AMS REALTY OF FLORIDA INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8827 CHESTERTON PLACE 10505 LAKEBREEZE DRIVE TAMPA, FL 33635 US SEMINOLE, FL 33772 US

Current Mailing Address: New Mailing Address:

8827 CHESTERTON PLACE
TAMPA, FL 33635 US

10505 LAKEBREEZE DRIVE
SEMINOLE, FL 33772 US

FEI Number: 20-1174943 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SARLEY, ROCCO J JR.

8827 CHESTERTON PLACE
TAMPA, FL 33635 US

SARLEY, CATHERINE A MRS
10505 LAKEBREEZE DRIVE
SEMINOLE, FL 33772 US

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: CATHERINE A. SARLEY 04/27/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 PRES
 () Delete

 Name:
 SARLEY, ROCCO J JR.

 Address:
 8827 CHESTERTON PLACE

City-St-Zip: TAMPA, FL 33635

 Title:
 VP
 () Delete

 Name:
 SARLEY, CATHERINE A

 Address:
 8827 CHESTERTON PLACE

 City-St-Zip:
 TAMPA, FL 33635 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition

Name: SARLEY, ROCCO J JR.
Address: 10505 LAKEBREEZE DRIVE
City-St-Zip: SEMINOLE, FL 33772 US

Title: PRES (X) Change () Addition

Name: SARLEY, CATHERINE A
Address: 10505 LAKEBREEZE DRIVE
City-St-Zip: SEMINOLE, FL 33772 US

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.

SIGNATURE: CATHERINE A. SARLEY PRES 04/27/2006