2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 15, 2005
Secretary of State

DOCUMENT# P04000082283

Entity Name: WIZARD REALTY, INC.

Current Principal Place of Business:

658 N BLAD EAGLE DR
MARCO ISLAND, FL 34145

New Principal Place of Business:

4519 SE 16TH PLACE
#105
CAPE CORAL, FL 33904

Current Mailing Address:

658 N BLAD EAGLE DR
MARCO ISLAND, FL 34145

New Mailing Address:

4519 SE 16TH PLACE
105
CAPE CORAL, FL 33904

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COTTER, TIMOTHY J P.A.
599 9 ST N STE 313
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MCMANN, EARL
Address: 658 N BLAD EAGLE DR
City-St-Zip: MARCO ISLAND, FL 34145

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: MCMANN, EARL
Address: 4519 SE 16TH PLACE #105
City-St-Zip: CAPE CORAL, FL 33904

Title: VP ( ) Change (X) Addition
Name: HEALEY, JOHANNA
Address: 4519 SE 16TH PLACE #105
City-St-Zip: CAPE CORAL, FL 33904

Title: SEC ( ) Change (X) Addition
Name: MULLIGAN, JAMES N
Address: 849 CALVERT AVE.
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: TREA ( ) Change (X) Addition
Name: MCMANN, EARL
Address: 4519 SE 16TH PLACE #105
City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EARL MCMANN P 11/15/2005

Electronic Signature of Signing Officer or Director — Date