## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P04000102403

Address:

City-St-Zip:

P.O. BOX 620475

OVIEDO, FL 327621681

FILED Nov 28, 2007 Secretary of State

			,	
Entity Name: DOUG REA	AL ESTATE CORP.			
Current Principal Place of Business:		New Principal Place o	of Business:	
1307 FOXTON LANE OVIEDO, FL 32765				
Current Mailing Address:		New Mailing Address	New Mailing Address:	
P.O. BOX 620475 OVIEDO, FL 327621681				
FEI Number: 34-2004561	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address of	New Registered Agent:	
DOUGLAS, DOREEN 1307 FOXTON LANE OVIEDO, FL 32765 US	3			
The above named entity su in the State of Florida.	ubmits this statement for the pur	pose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic	Signature of Registered Agent	t	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: P () D Name: DOUGLAS, DOR Address: P.O. BOX 62047: City-St-Zip: OVIEDO, FL 327	5	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: T () [ Name: DOUGLAS, HORA	Delete ACE	Title: T ( Name: DOUGLAS, D	X) Change ()Addition OREEN	

Address:

City-St-Zip:

P.O. BOX 620475

OVIEDO, FL 327621681

I hereby certify that the information supplied with this filing does not qualify 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: DOREEN DOUGLAS P 11/28/2007