## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000125077

City-St-Zip:

ORLANDO, FL 32805

Entity Name: CONSOLIDATED PROPERTY BROKERS, INC.

FILED Sep 07, 2005 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:			
1003 SOUTH KIRKMAN ROAD 201 ORLANDO, FL 32835			4543 LIGUSTRUM WAY ORLANDO, FL 32839				
Current Mailing Address:			New Mailir	ng Address:			
	STRUM WAY ), FL 32839						
FEI Number: FEI Number Applied For (X)		FEI Number Not Appli	FEI Number Not Applicable ( ) Certificate of Status Desire		( ) t		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
4543 LIGU	RE, SHERRY STRUM WAY ), FL 32839 US						
	named entity submits the of Florida.	is statement for the	purpose of changing it	s registered offic	ce or registered agent, o	or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent			ent	Date			
	ce with s. 607.193(2)(b), F.S. npaign Financing Trust Fund		ot receive the prior notice	<b>.</b>			
OFFICER	S AND DIRECTORS:		ADDITION	S/CHANGES TO	O OFFICERS AND DIR	ECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete PRIESTER, SHERRY 4543 LIGUSTRUM WAY ORLANDO, FL 32839		Title: Name: Address: City-St-Zip:	( ) Cl	hange ( ) Addition		
Title: Name: Address: City-St-Zip:	VP ( ) Delete PARAMORE, CANDACE 2914 ROUNDABOUT LANE ORLANDO, FL 32816		Title: Name: Address: City-St-Zip:	( ) Cl	hange()Addition		
Title: Name: Address:	SEC. () Delete PRIESTER, ROSA 3259 W. SOUTH ST.		Title: Name: Address:	SEC. (X) C PRIESTER, ROSA 3249 W. SOUTH S			

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.

City-St-Zip:

ORLANDO, FL 32805

SIGNATURE: SHERRY PARAMORE P 09/07/2005