2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000156651

FILED Mar 27, 2007 Secretary of State

Entity Name: THE FLORIDA REAL ESTATE STORE OF LEE COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 18441 TELEGRAPH CREEK LANE 18660 RIVER ESTATES LN ALVA, FL 33920 ALVA, FL 33920 **Current Mailing Address: New Mailing Address:** 18660 RIVER ESTATES LN 18441 TELEGRAPH CREEK LANE ALVA, FL 33920 ALVA, FL 33920 US FEI Number: 20-1885476 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: INFIESTO, CYNTHIA INFIESTO, CYNTHIA 18441 TELEGRAPH CREEK LANE 18660 RIVER ESTATES LN ALVA, FL 33920 ALVA, FL 33920 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: 03/27/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition INFIESTO, CYNTHIA INFIESTO, CYNTHIA Name: Name: 18660 RIVER ESTATES LN 18441 TELEGRAPH CREEK LANE Address: Address: City-St-Zip: ALVA, FL 33920 City-St-Zip: ALVA, FL 33920 Title: VΡ Title: () Delete () Change () Addition Name: BROWNE, JOSEPH K Name: 30 W. 14TH STREET Address: Address: CHICAGO, IL 60605 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BLAVVISE, ROY Name: Name: 4756 W. BRYN MAWR Address: Address: City-St-Zip: CHICAGO, IL 60646 City-St-Zip:

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: CYNTHIA INFIESTO P 03/27/2007