

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000161529

FILED
May 20, 2005
Secretary of State

Entity Name: TOTAL REAL ESTATE SOLUTIONS, INC.

Current Principal Place of Business:

1328 S BABCOCK STREET
MELBOURNE, FL 32901

New Principal Place of Business:

231 SEAVIEW STREET
MELBOURNE BEACH, FL 32951

Current Mailing Address:

1328 S BABCOCK STREET
MELBOURNE, FL 32901

New Mailing Address:

P.O. BOX 917208
LONGWOOD, FL 32791 US

FEI Number: 34-2026038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YANDELL, TIM
1328 S BABCOCK STREET
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

YANDELL, TIM
231 SEAVIEW STREET
MELBOURNE BEACH, FL 32951 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:

05/20/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: YANDELL, TIM
Address: 231 SEAVIEW STREET
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VS () Delete
Name: DESOTO, OAULA
Address: 127 DELVALLE STREET
City-St-Zip: MELBOURNE BEACH, FL 32951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TIM YANDELL

DPT

05/20/2005

Electronic Signature of Signing Officer or Director

Date