## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000166871

1295 DOGTRACK RD

PENSACOLA, FL 32506

Address:

City-St-Zip:

Entity Name: AUNER & BLANCHARD REALTY OF FLORIDA. INC

FILED Apr 11, 2006 Secretary of State

y	MICE MONERY	A DEMINION NEW PROPERTY OF THE	i Lordo,				
Current Principal Place of Business:				New Principal Place of Business:			
1295 DOGTRACK RD PENSACOLA, FL 32506				415 SOUTH FLORIDA BLANCA PENSACOLA, FL 32502			
Current Mailing Address:				New Mailing Address:			
1295 DOGTRACK RD PENSACOLA, FL 32506				415 SOUTH FLORIDA BLANCA PENSACOLA, FL 32502			
FEI Number	: 11-3735195	FEI Number Applied For()	FEI Nun	nber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SHAW, CRISTY 1295 DOGTRACK RD PENSACOLA, FL 32506 US				MORGAN, JAMES E 415 SOUTH FLORIDA BLANCA PENSACOLA, FL 32502 US			
	named entity e of Florida.	submits this statement for the	purpose o	f changing i	ts registere	ed office or registered agent, or both,	
SIGNATURE: JAMES E. MORGAN				04/11/2006			
	Electror	nic Signature of Registered Ag	gent			Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DVS ( BLANCHARD, I 1821 GULF SH GULF SHORES	ORES PKWY		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	PTD ( AUNER, T AUS 1821 GULF SH GULF SHORES	ORES PKWY		Title: Name: Address: City-St-Zip:		( ) Change( ) Addition	
Title: Name:	AVP ( ) SHAW, CRIST	) Delete		Title: Name:	AVP MORGAN,	(X) Change()Addition JAMES E	

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.

Address:

City-St-Zip:

SIGNATURE: T. AUSTIN AUNER PTD 04/11/2006

415 SOUTH FLORIDA BLANCA

PENSACOLA, FL 32502