## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000005026

Entity Name: REALTY CITY, CORP.

FILED Sep 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 13400 SW 80 AVENUE
 10720 SW 139 RD

 PINECREST, FL 33156
 MIAMI, FL 33176

Current Mailing Address: New Mailing Address:

13400 SW 80 AVENUE 10720 SW 139 RD PINECREST, FL 33156 MIAMI, FL 33176

FEI Number: 20-2179935 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SEER, LISELOTTE 10720 SW 139 STREET MIAMI, FL 33176 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:

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,VP ( ) Delete Title: P,VP (X) Change ( ) Addition Name: SEER, LISELOTTE Name: SEER, LISELOTTE

 Address:
 13400 SW 80 AVE
 Address:
 10720 SW 139 RD

 City-St-Zip:
 PINECREST, FL 33156
 City-St-Zip:
 MIAMI, FL 33176

 $\label{eq:title:state} \begin{tabular}{lll} Title: & S,T & ( ) Delete & Title: & S,T & (X) Change ( ) Addition \\ \end{tabular}$ 

 Name:
 SEER, LISELOTTE
 Name:
 SEER, LISELOTTE

 Address:
 13400 SW 80 AVE
 Address:
 10720 SW 139 RD

 City-St-Zip:
 PINECREST, FL 33156
 City-St-Zip:
 MIAMI, FL 33176

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: LISELOTTE SEER P 09/20/2009