2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P05000005353

Entity Name: SOUTHERN PROPERTY REALITY, INC.

Current Principal Place of Business:

8159 ARLINGTON EXPRESSWAY STE 28
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

8159 ARLINGTON EXPRESSWAY STE 28
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GEISLER, M. CURT
8159 ARLINGTON EXPRESSWAY STE 28
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

RAPPAPORT, TODD
8159 ARLINGTON EXPRESSWAY STE 28
JACKSONVILLE, FL 32211 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: TODD RAPPAPORT 05/01/2006
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: DCP ( ) Delete
Name: GEISLER, M. CURT
Address: 8159 ARLINGTON EXPRESSWAY STE 28
City-St-Zip: JACKSONVILLE, FL 32211

Title: CEO ( ) Delete
Name: GEISLER, M. CURT
Address: 8159 ARLINGTON EXPRESSWAY STE 28
City-St-Zip: JACKSONVILLE, FL 32211

Title: DCFO ( ) Delete
Name: TRIMBLE, JAMES H
Address: 8159 ARLINGTON EXPRESSWAY STE 28
City-St-Zip: JACKSONVILLE, FL 32211

Title: DV ( ) Delete
Name: PAYSINGER, DAVID
Address: 8159 ARLINGTON EXPRESSWAY STE 28
City-St-Zip: JACKSONVILLE, FL 32211

Title: DV ( ) Delete
Name: RAPPAPORT, TODD
Address: 8159 ARLINGTON EXPRESSWAY STE 28
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: TODD RAPPAPORT RADV 05/01/2006
Electronic Signature of Signing Officer or Director Date