



2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000011627 1. Entity Name TOWNSEND REAL ESTATE INVESTMENT INC.		
Principal Place of Business 15741 SW 59TH TERRACE MIAMI, FL 33193 790 Dowlin Forge Rd Downingtown PA 19335		Mailing Address 15741 SW 59TH TERRACE MIAMI, FL 33193 790 Dowlin Forge Rd Downingtown PA 19335
2. Principal Place of Business 790 Dowlin Forge Rd Suite, Apt. #, etc.	3. Mailing Address 790 Dowlin Forge Rd Suite, Apt. #, etc.	
City & State Downingtown PA Zip 19335	City & State Downingtown PA Zip 19335	4. FEI Number 270114022
Country USA	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent TOWNSEND, RAMON D 15741 SW 59TH TERRACE MIAMI, FL 33193		7. Name and Address of New Registered Agent Name Norma E. Townsend Street Address (P.O. Box Number is Not Acceptable) 6200 NW 44th St # 103 City Lauderhill
State FL		Zip Code 33319
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Norma E. Townsend <i>Norma E. Townsend</i> 9/22/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$550.00 Due by September 15, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE P	NAME TOWNSEND, EVE L	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 15741 SW 59TH TERRACE	STREET ADDRESS 790 Dowlin Forge Rd	STREET ADDRESS Downingtown PA 19335
CITY-ST-ZIP MIAMI, FL 33193	CITY-ST-ZIP Downingtown PA 19335	CITY-ST-ZIP Downingtown PA 19335
TITLE V	NAME TOWNSEND, RAMON D	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 15741 SW 60TH TERRACE	STREET ADDRESS 790 Dowlin Forge Rd	STREET ADDRESS Downingtown PA 19335
CITY-ST-ZIP MIAMI, FL 33193	CITY-ST-ZIP Downingtown PA 19335	CITY-ST-ZIP Downingtown PA 19335
TITLE <i>Rafael</i>	NAME <i>Rafael</i>	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <i>Rafael</i>	STREET ADDRESS <i>Rafael</i>	STREET ADDRESS <i>Rafael</i>
CITY-ST-ZIP <i>Rafael</i>	CITY-ST-ZIP <i>Rafael</i>	CITY-ST-ZIP <i>Rafael</i>
TITLE <input type="checkbox"/> Delete	NAME <i>Rafael</i>	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <i>Rafael</i>	STREET ADDRESS <i>Rafael</i>	STREET ADDRESS <i>Rafael</i>
CITY-ST-ZIP <i>Rafael</i>	CITY-ST-ZIP <i>Rafael</i>	CITY-ST-ZIP <i>Rafael</i>
TITLE <input type="checkbox"/> Delete	NAME <i>Rafael</i>	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <i>Rafael</i>	STREET ADDRESS <i>Rafael</i>	STREET ADDRESS <i>Rafael</i>
CITY-ST-ZIP <i>Rafael</i>	CITY-ST-ZIP <i>Rafael</i>	CITY-ST-ZIP <i>Rafael</i>
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: Ramon D. Townsend <i>Ramon D. Townsend</i> 9/19/06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 9/19/06
Daytime Phone # (610) 507-0827		Daytime Phone # 0827

FILED
06 SEP 25 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09062006 Chg-P CR2E034 (11/05)

Name **Norma E. Townsend**
 Street Address (P.O. Box Number is Not Acceptable)
6200 NW 44th St # 103
 City **Lauderhill** FL Zip Code **33319**

FILE NOW!!! FEE IS \$550.00
Due by September 15, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

TITLE	NAME	Delete
P	TOWNSEND, EVE L	<input type="checkbox"/>
STREET ADDRESS 15741 SW 59TH TERRACE		
CITY-ST-ZIP MIAMI, FL 33193		
V	TOWNSEND, RAMON D	<input type="checkbox"/>
STREET ADDRESS 15741 SW 60TH TERRACE		
CITY-ST-ZIP MIAMI, FL 33193		
<i>Rafael</i>		
<input type="checkbox"/> Delete		
<input type="checkbox"/> Delete		
<input type="checkbox"/> Delete		

TITLE	NAME	Change	Addition
<input checked="" type="checkbox"/>	790 Dowlin Forge Rd	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS Downingtown PA 19335			
CITY-ST-ZIP Downingtown PA 19335			
<input checked="" type="checkbox"/>	790 Dowlin Forge Rd	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS Downingtown PA 19335			
CITY-ST-ZIP Downingtown PA 19335			
000080147220 09/25/06--01045--022 **550.00			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			

SIGNATURE: **Ramon D. Townsend** *Ramon D. Townsend* **9/19/06** **0827**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #