


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2006 8:00 am**  
**Secretary of State**

05-03-2006 90236 008 \*\*\*150.00

<b>DOCUMENT # P05000029665</b> 1. Entity Name <b>CARLISLE &amp; COMPANY REAL ESTATE, INC.</b>																																																																																																																																			
Principal Place of Business <b>211 NURMI DRIVE FORT LAUDERDALE, FL 33301</b>			Mailing Address <b>211 NURMI DRIVE FORT LAUDERDALE, FL 33301</b>																																																																																																																																
2. Principal Place of Business <b>1324 Bayview Drive</b> Suite, Apt. #, etc.		3. Mailing Address <b>1324 Bayview Drive</b> Suite, Apt. #, etc.																																																																																																																																	
City & State <b>Ft. Lauderdale FL</b>		City & State <b>Ft. Lauderdale FL</b>																																																																																																																																	
Zip <b>33304</b>	Country <b>USA</b>	Zip <b>33304</b>	Country <b>USA</b>																																																																																																																																
6. Name and Address of Current Registered Agent  <b>LEGAL INFORMATION SERVICES, INC. 2500 WESTON ROAD STE 404 WESTON, FL 33331</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code																																																																																																																																
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																																																																																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. 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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.																																																																																																																																			
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																																																			



04262006 Chg-P CR2E034 (11/05)

4. FEI Number <b>20-8561583</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

4/26/06 (954) 604-1973  
Date Daytime Phone #