

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000078735

FILED
Feb 02, 2006
Secretary of State**Entity Name:** KTNA REAL ESTATE CORP.**Current Principal Place of Business:**12800 UNIVERSITY DRIVE
SUITE 575
FORT MYERS, FL 33907 US**New Principal Place of Business:****Current Mailing Address:**12800 UNIVERSITY DRIVE
SUITE 575
FORT MYERS, FL 33907 US**New Mailing Address:****FEI Number:** 20-2950679**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DARMANIN, ART
12800 UNIVERSITY DRIVE
SUITE 575
FORT MYERS, FL 33907 US**Name and Address of New Registered Agent:**

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**OFFICERS AND DIRECTORS:****Title:** P () Delete
Name: DARMANIN, ART
Address: 12800 UNIVERSITY DRIVE SUITE 575
City-St-Zip: FORT MYERS, FL 33907 US**Title:** VP () Delete
Name: CRESSWELL, NEIL
Address: 12800 UNIVERSITY DRIVE SUITE 575
City-St-Zip: FORT MYERS, FL 33907 US**Title:** VP () Delete
Name: HOLLERAN, TIMOTHY
Address: 2043 SE 28TH TERR
City-St-Zip: CAPE CORAL, FL 33904**Title:** S (X) Delete
Name: HOUMES, KATHERINE
Address: 17605 HANNA RD
City-St-Zip: LUTZ, FL 33549**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:

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: ART DARMANIN

P

02/02/2006

Electronic Signature of Signing Officer or Director_____
Date