

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000084881

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** PROPERTY MANAGEMENT FOR FALCONE REALTY GROUP, INC.

**Current Principal Place of Business:**

1406 SE 46TH LN SUITE 6  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

17105 SAN CARLOS BLVD  
SUITE A-5  
FT. MYERS BEACH, FL 33931

**Current Mailing Address:**

1406 SE 46TH LN SUITE 6  
CAPE CORAL, FL 33904

**New Mailing Address:**

17105 SAN CARLOS BLVD  
SUITE A-5  
FT. MYERS BEACH, FL 33931

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FALCONE, DOREEN  
1406 SE 46TH LN SUITE 6  
CAPE CORAL, FL 33904 US

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

FALCONE, DOREEN  
17105 SAN CARLOS BLVD  
SUITE A-5  
FT. MYERS BEACH, FL 33931 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

05/01/2007

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: D ( ) Delete  
Name: FALCONE, DOREEN  
Address: 1406 SE 46TH LN SUITE 6  
City-St-Zip: CAPE CORAL, FL 33904

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: FALCONE, DOREEN  
Address: 17105 SAN CARLOS BLVD A-5  
City-St-Zip: FT. MYERS BEACH, FL 33931

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: DOREEN M FALCONE

D

05/01/2007

Electronic Signature of Signing Officer or Director

Date