

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000088075

FILED  
Feb 18, 2009  
Secretary of State

Entity Name: COUNTS REAL ESTATE GROUP, INC.

**Current Principal Place of Business:**

2104 THOMAS DRIVE  
PANAMA CITY BEACH, FL 32408

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 27279  
PANAMA CITY BEACH, FL 32411

**New Mailing Address:**

FEI Number: 20-3096138

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COUNTS, STEVE G  
2104 THOMAS DRIVE  
PANAMA CITY BEACH, FL 32408 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTS ( ) Delete  
Name: COUNTS, STEVEN G  
Address: 2104 THOMAS DR.  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: V ( ) Delete  
Name: HODGES, KEITH  
Address: 2104 THOMAS DR  
City-St-Zip: PANAMA CITY, FL 32408

Title: VP (X) Delete  
Name: FREE, REX  
Address: 2104 THOMAS DR  
City-St-Zip: PANAMA CITY, FL 32408

Title: V ( ) Delete  
Name: OAKES, JASON P  
Address: 2104 THOMAS DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

**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: VP (X) Change ( ) Addition  
Name: OAKES, JASON P  
Address: 2104 THOMAS DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

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: STEVE COUNTS

PTS

02/18/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date