

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 19, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P05000120801

1. Entity Name  
COMMERCIAL VENTURE REALTY, INC.



Principal Place of Business  
2430 PERIWINKLE WAY, SUITE B  
SANIBEL, FL 33957

Mailing Address  
2430 PERIWINKLE WAY, SUITE B  
SANIBEL, FL 33957



01112007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-3543503  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SHIELDS, CHRISTPHER J  
1833 HENDRY STREET  
FORT MYERS, FL 33901

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME ARMENIA, JOSEPH  
STREET ADDRESS 2430 PERIWINKLE WAY, SUITE B  
CITY-ST-ZIP SANIBEL, FL 33957

TITLE VD  
NAME ARMENIA, JOHN  
STREET ADDRESS 2430 PERIWINKLE WAY, SUITE B  
CITY-ST-ZIP SANIBEL, FL 33957

TITLE STD  
NAME ARMENIA, LUCY  
STREET ADDRESS 2430 PERIWINKLE WAY, SUITE B  
CITY-ST-ZIP SANIBEL, FL 33957

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000663913  
03/27/07-80091-003 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

*Lucy Armenia, Secy.* 3-14-07 234-3459300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #