

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128489

Entity Name: RYAN SANDERS REALTY INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

3399 CYPRESS GARDENS ROAD
SUITE B
WINTER HAVEN, FL 33884 US

New Principal Place of Business:

2024 KAPREE CT
WINTER HAVEN, FL 33884 US

Current Mailing Address:

PO BOX 7166
WINTER HAVEN, FL 338837166 US

New Mailing Address:

FEI Number: 59-3574547 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROFESSIONAL TAX CONSULTANTS, INC
112 AVENUE E SW
WINTER HAVEN, FL 33880 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: PD () Delete
Name: SANDERS, RYAN K
Address: 2024 KAPREE CT
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: VPD () Delete
Name: SANDERS, SHEILA M
Address: 2024 KAPREE CT
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: SD () Delete
Name: YOST, RONALD A
Address: 411 SUWANNEE RD SE
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: VPD () Change (X) Addition
Name: TAYLOR, KAREN
Address: 1411 GRAND CAYMAN CIRCLE
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: TD () Change (X) Addition
Name: TAYLOR, JACK E
Address: 1411 GRAND CAYMAN CIRCLE
City-St-Zip: WINTER HAVEN, FL 33884

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: RONALD A. YOST

SD

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date