## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P05000151906

Entity Name: REAL ESTATE 9, INC.

**Current Principal Place of Business:** 

FILED May 04, 2007 Secretary of State

1919 COURTNEY DRIVE SUITE 2A FORT MYERS, FL 33901

Current Mailing Address: New Mailing Address:

1919 COURTNEY DRIVE SUITE 2A FORT MYERS, FL 33901

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

MACE, KENNETH J

1919 COURTNEY DRIVE
SUITE 2A
FORT MYERS, FL 33901 US

KING, SUE E
1919 COURTNEY DRIVE
SUITE 2A
SUITE 2A
FORT MYERS, FL 33901 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: SUE E KING 05/04/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**New Principal Place of Business:** 

Title: P ( ) Delete Title: ( ) Change ( ) Addition Name: KING, SUE E Name:

Address: 1919 COURTNEY DRIVE, SUITE 2A Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

Name: MACE, KENNETH J Name: KING, SUE E

Address: 1919 COURTNEY DRIVE, SUITE 2A Address: 1919 COURTNEY DRIVE, SUITE 2A

City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33901

Title: SEC ( ) Delete Title: SEC (X) Change ( ) Addition

Name: MACE, KENNETH J Name: KING, SUE E

Address: 1919 COURTNEY DRIVE, SUITE 2A Address: 1919 COURTNEY DRIVE, SUITE 2A

City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33901

Title: TR ( ) Delete Title: TR (X) Change ( ) Addition

Name: MACE, KENNETH J Name: KING, SUE E

Address: 1919 COURTNEY DRIVE, SUITE 2A Address: 1919 COURTNEY DRIVE, SUITE 2A

City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33901

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: SUE E KING P 05/04/2007