2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000025901

1. Entity Name DAY R.E., INC.



FILED Mar 10, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

4373 - G TAHITIAN GARDENS CIRCLE HOLIDAY, FL 34691 4373 - G TAHITIAN GARDENS CIRCLE HOLIDAY, FL 34691



DO NOT WRITE IN THIS SPACE

01142008 No Chg-P

CR2E034 (11/05)

4. FEI Number 76-0817820

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAY, PATRICK H 4373 - G TAHITIAN GARDENS CIRCLE HOLIDAY, FL 34691

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	ove named entity submits this statement for the partitions of registered agent.	ourpose of changing its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating).			
F: After	ILE NOW!!! FEE IS \$150.00 May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	U00000852098 03/26/08-80014-024 150:00
10.	OFFICERS AND DIRECTORS		
TITLE	P		
MARAE	DAY DATRICK H		

STREET ADDRESS 4373 - G TAHITIAN GARDENS CIRCLE HOLIDAY, FL 34691 CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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12. Thereby 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LCK Sp

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