2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2007 8:00 am Secretary of State DOCUMENT # P06000035418 04-23-2007 90089 027 ***150.00 FREESTYLE REALTY, INC. Principal Place of Business Mailing Address 13893 ATHENS DRIVE 13893 ATHENS DRIVE JACKSONVILLE, FL 32223 JACKSONVILLE, FL 32223 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03052007 CR2E034 (12/06) Chg-P Applied For City & State City & State 4. FEI Number 56-2566561 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MORGAN, ROBERT M Street Address (P.O. Box Number is Not Acceptable) MORGAN OF FORD BOWLUS DUSS ET AL. 10110 SAN JOSE BLVD JACKSONVILLE, FL 32257 City Zip Code 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Delete ☐ Change ■ Addition NAME SACHS, JERRY M NAME STREET ADDRESS 13893 ATHENS DRIVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32223 CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition THLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this indicated on this report or supplemental report is true of the corporation or the receiver or trustee empowere changed, or on an attachment with an address, with tiling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information and accurate of that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the property as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if Jerry M Sachs SIGNATURE: _ AND TYPED ON PROVIDED NAME

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