

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90067 024 ***150.00

DOCUMENT # P06000053080 1. Entity Name MY FLORIDA REALTORS AND MORE, INC.					
Principal Place of Business 327 EAST CHURCH STREET JACKSONVILLE, FL 32202			Mailing Address 327 EAST CHURCH STREET JACKSONVILLE, FL 32202		
2. Principal Place of Business - No P.O. Box # 1628 SAN MARCO BLVD		3. Mailing Address 1628 SAN MARCO BLVD			
Suite, Apt. #, etc. 10		Suite, Apt. #, etc. 10			
City & State JACKSONVILLE FL		City & State JACKSONVILLE FL		4. FEI Number 20-4712968	
Zip 32207		Country DUVAL		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
Zip 32207		Country DUVAL		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SANTORO, THOMAS C ATTORNE 1700 WESS ROAD SUITE 5 ORANGE PARK, FL 32073			7. Name and Address of New Registered Agent Name VITINA C. PELLOT Street Address (P.O. Box Number is Not Acceptable) 1628 SAN MARCO BLVD STE 10 City JACKSONVILLE FL Zip Code 32207		
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 DATE _____ (Signature, typed or printed name of registered agent and title is acceptable) (NOTE: Registered Agent signature required when reinstating)					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST PELLOT, VITINA C 327 EAST CHURCH STREET JACKSONVILLE, FL 32202	☐ Delete			
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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; it changed, or on an attachment with an address or all other like empowered.					
SIGNATURE: April 15, 2007 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					