

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 12, 2007 8:00 am**  
**Secretary of State**

02-19-2007 90049 043 \*\*\*158.75

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                     |                                                                                     |                                                                                |                                                                                                                                                                                                                                       |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # P06000069022</b><br>1. Entity Name<br><b>CONSUMER PROPERTIES, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                     |                                                                                     |                                                                                |                                                                                                                                                      |  |
| Principal Place of Business<br><b>10012 N DALE MABRY HWY - STE 109<br/>TAMPA, FL 33618</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                     |                                                                                     | Mailing Address<br><b>10012 N DALE MABRY HWY - STE 109<br/>TAMPA, FL 33618</b> |                                                                                                                                                                                                                                       |  |
| 2. Principal Place of Business - No P.O. Box #<br><br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                     | 3. Mailing Address<br><br>Suite, Apt. #, etc.                                       |                                                                                |                                                                                                                                                                                                                                       |  |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                     | City & State                                                                        |                                                                                |                                                                                                                                                                                                                                       |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Country                                                                                                                                             | Zip                                                                                 | Country                                                                        |                                                                                                                                                                                                                                       |  |
| 6. Name and Address of Current Registered Agent<br><br><b>BAKOWSKI, PETER<br/>10012 N DALE MABRY HWY - STE 109<br/>TAMPA, FL 33618</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                     |                                                                                     |                                                                                | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |  |
| 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.<br><br>SIGNATURE _____ DATE _____<br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when removing)</small>                                                                                                                                                                                                                     |                                                                                                                                                     |                                                                                     |                                                                                |                                                                                                                                                                                                                                       |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2007 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                     | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                                                | <b>\$5.00 May Be<br/>Added to Fees</b>                                                                                                                                                                                                |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                     |                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                   |                                                                                                                                                                                                                                       |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | PD<br>BAKOWSKI, PETER<br>10012 N DALE MABRY HWY - STE 109<br>TAMPA, FL 33618 <div style="text-align: right;"><input type="checkbox"/> Delete</div>  |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                 | <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                               |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VPD<br>BAKOWSKI, SUSAN<br>10012 N DALE MABRY HWY - STE 109<br>TAMPA, FL 33618 <div style="text-align: right;"><input type="checkbox"/> Delete</div> |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                 | <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                               |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <div style="text-align: right;"><input type="checkbox"/> Delete</div>                                                                               |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                 | <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                               |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <div style="text-align: right;"><input type="checkbox"/> Delete</div>                                                                               |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                 | <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                               |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <div style="text-align: right;"><input type="checkbox"/> Delete</div>                                                                               |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                 | <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                               |  |
| 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 if changed, or on an attachment with an address, with all other like empowered. |                                                                                                                                                     |                                                                                     |                                                                                |                                                                                                                                                                                                                                       |  |
| SIGNATURE: <br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                     |                                                                                     | Date: <b>2/12/07</b> (813) 942-3377<br><small>Daytime Phone #</small>          |                                                                                                                                                                                                                                       |  |



Division of Corporations

2007 Annual Report

Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the  
annual report form.

|                                                   |                           |
|---------------------------------------------------|---------------------------|
| This information cannot be changed on the report. |                           |
| Document Number                                   | P06000069022              |
| Business Entity Name                              | CONSUMER PROPERTIES, INC. |
| Original File Date                                | 05/15/2006                |

FBI Number

Principal Address 10012 N DALE MABRY HWY - STE 109  
TAMPA, FL 33618

Mailing Address 10012 N DALE MABRY HWY - STE 109  
TAMPA, FL 33618

Registered Agent PETER BAKOWSKI  
10012 N DALE MABRY HWY - STE 109  
TAMPA, FL 33618

Officer/Director Name And Address

PD  
PETER BAKOWSKI  
10012 N DALE MABRY HWY - STE 109  
TAMPA, FL 33618

VPD  
SUSAN BAKOWSKI  
10012 N DALE MABRY HWY - STE 109  
TAMPA, FL 33618

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