2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

May 02, 2007 8:00 am Secretary of State DOCUMENT # P06000073753 04-02-2007 90102 032 ***150.00 SNOW REALTY AND INVESTMENTS, INC. Principal Place of Business Mailing Address 3569 SANCTUARY DRIVE ST. CLOUD FL 34769 US 1509 EAGLES LANDING COURT KISSIMMEE FL 34744 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apl. #, etc. Suito, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOWES, TINA Y. 1509 EAGLES LANDING COURT Street Address (P.O. Box Number is Not Acceptable) KISSIMMEE FL 34744 City Zip Codo 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. (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete 11111 Addition Change HOWES, TINA Y NAM MALE 1509 EAGLES LANDING COURT STREET ADDRESS STREET ADORESS KISSIMMEE FL 34744 CITY SECTIP CHY ST AP 10111 Delete HHE Change ☐ Addition SHIFT ADDRESS SINTÉ L'ADDRESS CITY SE-ZIP CITY-SI 7IP 11113 ☐ Delete HHE Addition STREET ADDRESS STREET I ADDRESS CHY-SI-7P CHY SI ZIP HILE Delete mir ☐ Change Addition NAMI NAME SIRE ET ADDRESS STREET ADDRESS CHY SI-7P CITY ST. 7IP Delete MH. THE ☐ Change Addition STREET ADDRESS STREET ADDRESS CHY-SI-74P CITY ST ZIP Delete ☐ Change ☐ Addition NAM STREET ADORESS STILLET ADDRESS CUTY - S1 - /IP CITY ST-71P 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 1.19, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall ray the same legal effect as if made under eath; 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. 321-624-0402

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