2007 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P06000086208



FILED Sep 06, 2007 8:00 am Secretary of State

1. Entity Name GERI & LEW ENGLISH REALTORS, PA								09-06-2007 90010 025 ***150.00					
Principal Place of Business 2257 HAMPSTEAD COURT LEHIGH ACRES, FL 33971 US			Mailing Address 2257 HAMPSTEAD COURT LEHIGH ACRES, FL 33971 U			JS							
Principal Place of Business - No P.O. Box # 3. Mailing Address													
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					08252007	Chg-P	CR2E()34 (12/06)		
City & State	e		City & State					4. FEI Numb	20934	<i>+</i> 3	<u> </u>	plied For at Applicable	
Zip	Zip Country			Zip Coun			5. Certificate of Status Desired S8.75 Addition Fee Required						
	6. Name	and Address of Current	Registered A	gent				7. Name and	d Address of New	Registered	Agent		
LNOUGH	LEMEN					Name							
ENGLISH, LEWIS K JR 2257 HAMPSTEAD COURT LEHIGH ACRES, FL 33971						Street Address (P.O. Box Number is Not Acceptable)							
						City		Zip Code					
		y submits this statement for	or the purpose	of changing its	registere	ed office or	register	ed agent, or bo	oth, in the State of I		familiar with,	and accept	
the obligations of registered agent.													
SIGNATURE	Signature, typed	or printed name of registered agent	and title if applicable	e. (NOTE	: Registered	d Agent signati	ire required	when reinstating)		DATE			
· · · · ·	 	.5											
FILE NOWILL FEE IS \$150.00 Due by September 14, 2007 9. Election Campaign Finan Trust Fund Contribution.						ncing		00 May Be ed to Fees	In accordance corporation di				
10.	OFFICERS AND DIRECTORS 11.							ADDITIONS	/CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11	
TITLE						ST	ENG	Jich Ge	paldine B	<u>-</u> .	⊠ Change	☐ Addition	
NAME STREET ADDRESS	ENGLISH, GERALDINE B ESS 2257 HAMPSTEAD COURT					e Et address		<i>(1.</i> 010 ·	•			1	
CITY-ST-ZIP						-SI-ZIP 🗦 😹	*. 						
TITLE NAME	ST Delete TITL ENGLISH, LEWIS K JR NAM					r	EN	alish, l	Lewis K	JR	Change Ch	Addition	
STREET ADDRESS						ET ADDRESS							
CITY-ST-ZIP	LEHIGH A	CRES, FL 33971	·		_	-ST-ZIP:			- · · · · ·				
TITLE NAME				Delete	TITLE NAM						☐ Change	☐ Addition	
STREET ADDRESS						E1 ADDRESS							
CITY-ST-ZIP					CITY	- ST - ZIP							
TITLE NAME				☐ Delete	TITLE						☐: Change	☐ Addition	
STREET ADDRESS	ļ					et adoress							
C!TY-\$T-ZIP					CITY	- \$1 - ZIP							
TITLE				☐ Delete	TITLE						☐ Change	☐ Addition	
NAME STREET ADDRESS					NAM	E et address							
CITY-ST-ZIP						-SI-ZIP							
TITLE				☐ Detete	TITLE					_	☐ Change	☐ Addition	
NAME					NAM								
STREET ADDRESS CITY-ST-ZIP						£1 ADDRESS -ST-ZIP							
	 certify that the	e information supplied wit	h this filing doe	es not qualify fo	r the exe	emptions o	ontained	I in Chapter 11	9, Florida Statutes ct as if made unde	. I further cer	tify that the in	nformation	

of the corporation or the receiver or trustee empowered to execute and unal my signature sharinave line same legal energial energials in 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.

8/28/07

239-369-2563

SIGNATURE: SIGNATURE AND TYPED O