

2007 FOR PROFIT CORPORATION ANNUAL REPORT

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

08-06-2007 90031 015 ***150.00

DOCUMENT # P06000094416	
1. Entity Name WILLIAM HADE REAL ESTATE, INC.	



Principal Place of Business 600 KINGSMILL COVE, #202 LAKE MARY, FL 32746	Mailing Address 600 KINGSMILL COVE, #202 LAKE MARY, FL 32746
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2. Principal Place of Business - No P.O. Box # 4270 Shades Crest Lane Suite, Apt. #, etc.	3. Mailing Address 4270 Shades Crest Lane Suite, Apt. #, etc.
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City & State Sanford, FL	City & State Sanford, FL
Zip 32773	Zip 32773
Country Seminole	Country Seminole



08012007 Chg-P CR2E034 (12/06)

4. FEI Number 20-5224751	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HADE, WILLIAM J 600 KINGSMILL COVE, #202 LAKE MARY, FL 32746	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4270 Shades Crest Lane City Sanford FL with FL Zip Code 32773
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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 William J. Hade DATE 8/1/07

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HADE, WILLIAM J 600 KINGSMILL COVE, #202 LAKE MARY, FL 32746 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4270 Shades Crest Lane Sanford, FL 32773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: William J. Hade DATE 8/1/07 DAYTIME PHONE # 407-427-0414

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

From the desk of:
William J. Hade

40128236
#P06 0000 94416

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I have recently been notified that I have not submitted my annual report for William Hade Real Estate, Inc. I did not receive the original notice. I moved last December. When I received a "Notice of Intent to Dissolve", that was forwarded to my current address, I realized that I had missed this filing. I am also a full time graduate student of psychology, and the business has not made any revenue this year, so it was not at the forefront of my mind.

Please accept this application for annual report and my check for \$150.

Should you have any questions, please feel free to call me at 407-427-0414.

I am also serving my internship in a rehab center, so I am not able to answer the phone when in session, but will return the call as soon as I can.

Thank you for your consideration here.

Sincerely,



William J. Hade
President, William Hade Real Estate, Inc.

Enclosures: