2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2008 8:00 am
Secretary of State
04-28-2008 90342 036 ***150.00

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1. Entity Name
EGAN REAL ESTATE, CORP.

66011185

Principal Place of Business	Mailing Address
2804 BRIARWOOD LANE SEBRING, FL 33875	2804 BRIARWOOD LANE SEBRING, FL 33875

03282008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5548 Castania Drive	P. O. Box 8117
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sebring, FL	City & State: Sebring, FL
Zip: 33872 Country: Highlands	Zip: 33872 Country: Highlands

4. FEI Number 38-3761909 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
EGAN, JAMES P 2804 BRIARWOOD LANE SEBRING, FL 33875	Name: James P. Egan Street Address (P.O. Box Number is Not Acceptable): ~~P. O. Box 8117~~ 5548 Castania Dr. City: Sebring, FL **FL** Zip Code: 33872

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: JAMES P. EGAN DATE: 4/4/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 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	PSTD EGAN, JAMES P 2804 BRIARWOOD LANE SEBRING, FL 33875	☒ Delete	PSTD Egan, James P. 5548 Castania Drive Sebring, Florida 33872	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ 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: JAMES P EGAN 4/4/08 (863) 385-8975
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #