

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000095169

Entity Name: SIGNET REAL ESTATE, INC.

FILED
Mar 27, 2009
Secretary of State

Current Principal Place of Business:

610 WILLIAMS AVE.
LEHIGH ACRES, FL 33972

New Principal Place of Business:

Current Mailing Address:

610 WILLIAMS AVE.
LEHIGH ACRES, FL 33972

New Mailing Address:

FEI Number: 26-0784609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAYUSA, MICHAEL F
1922 VICTORIA AVE., SUITE A
FT. MYERS, FL 33901 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANTOS, YOLANDA
Address: 610 WILLIAMS AVE.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: VTD () Delete
Name: SANTOS, JONATHAN
Address: 610 WILLIAMS AVE.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: SD () Delete
Name: SANTOS, CALEB
Address: 610 WILLIAMS AVE.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: MORSE, JACK A
Address: 220 HAMILTON AVE
City-St-Zip: LEHIGH ACRES, FL 33936

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YOLANDA SANTOS

PD

03/27/2009

Electronic Signature of Signing Officer or Director

Date