

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000028921

**FILED**  
**Mar 27, 2011**  
**Secretary of State**

**Entity Name:** CHRISTA BROOKS REAL ESTATE, PA

**Current Principal Place of Business:**

1101 SE 4TH TERRACE  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

1101 SE 4TH TERRACE  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 27-2204161      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SWAN, LAWRENCE  
709 CAPE CORAL PARKWAY WEST  
CAPE CORAL, FL 33914      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

**OFFICERS AND DIRECTORS:**

**Title:** DPVS  
**Name:** BROOKS, CHRISTA  
**Address:** 1101 SE 4TH TERRACE  
**City-St-Zip:** CAPE CORAL, FL 33990

**Title:** T  
**Name:** BROOKS, CHRISTA  
**Address:** 1101 SE 4TH TERRACE  
**City-St-Zip:** CAPE CORAL, FL 33990

I hereby 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 all other like empowered.

SIGNATURE: CHRISTA BROOKS

DPVS

03/27/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date