


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 05, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P93000023591</b>	
1. Entity Name THE REAL ESTATE BOOK OF CENTRAL FLORIDA, INC.	

Principal Place of Business PMB 263 3101 SW 34 AVE #905 OCALA, FL 34474-7447 US	Mailing Address 1901 S W 42ND STREET OCALA, FL 34474 US
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01042007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3179796	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

FLANAGAN, GREGORY S  
1 NE 1ST AVENUE  
SUITE 303  
OCALA, FL 34470

**DO NOT WRITE IN THIS SPACE**

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

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, SHARON L 1901 S W 42ND STREET OCALA, FL 34474
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, BRUCE A 1901 S W 42ND STREET OCALA, FL 34474
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U00000576827  
01/05/07-80002-002 150.00

**DO NOT WRITE IN THIS SPACE**

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:**  **BRUCE A. Miller, Treasurer** 1/4/07 352-854-299 ✓  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #