

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90127 042 ***150.00

DOCUMENT # P93000025032

1. Entity Name

WYATT REAL ESTATE SERVICES, INC.



Principal Place of Business

1211 NORTH WESTSHORE BLVD.
TAMPA FL 33607

Mailing Address

1211 NORTH WESTSHORE BLVD.
TAMPA FL 33607



1st MOORE

CR2E034 (10/05)

2. Principal Place of Business

2141 Main Street

Suite, Apt. #, etc.

Suite "N"

City & State

Dunedin FL

Zip

34698

Country

Penellas

3. Mailing Address

2141 Main Street

Suite, Apt. #, etc.

Suite "N"

City & State

Dunedin FL

Zip

34698

Country

Penellas

4. FEI Number

59-3174888

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WYATT, PAUL
1211 N. WESTSHORE BLVD.
TAMPA FL 33607

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Paul Wyatt

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when correlating)

3/20/06

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME WYATT, PAUL
STREET ADDRESS 2036 WHITNEY DR.
CITY-ST-ZIP CLEARWATER FL 34620

TITLE S ☐ Delete
NAME WYATT, MARILYN
STREET ADDRESS 2036 WHITNEY DR
CITY-ST-ZIP CLEARWATER FL 34620

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Paul Wyatt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/06

Day

727 733 3200

Daytime Phone #