

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000025489

Entity Name: REALNOR HALLANDALE, INC.

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

700 BRICKELL AVENUE  
MIAMI, FL 33131 US

## New Principal Place of Business:

## Current Mailing Address:

50 S LASALLE STREET  
CHICAGO, IL 60675 US

## New Mailing Address:

FEI Number: 65-0401730

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STOTT, VALERIE A  
700 BRICKELL AVENUE  
MIAMI, FL 33131 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: P ( ) Delete  
Name: ALONSO, JUAN C  
Address: 700 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131 US

Title: S ( ) Delete  
Name: PEDROSO, GLENDA  
Address: 700 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131 US

Title: S (X) Delete  
Name: NOBLE, CARLOS  
Address: 700 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131 US

Title: T (X) Delete  
Name: MCCORSKEY, RICHARD  
Address: 700 BRICKELL AVE  
City-St-Zip: MIAMI, FL 33131 US

Title: V (X) Delete  
Name: STOTT, VALERIE A  
Address: 700 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ALONSO, JUAN  
Address: 700 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131 US

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

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: JUAN ALONSO

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date