## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

<u>`</u>	AMENDED AM	TOAL ILLI O	1.		_		_		
1. Entity Nam	MENT # P93000029 EACH REALTY, INC.	629	<u>?</u> 9				FILED 6-30 AM 9:09		
Principal Place	e of Business		7				- +		
34894 EMERALD COAST PARKWAY		Mailing Address 34894 EMERALD COAST PARKWAY				Uli	dizar y	FSTA	TE
DESTIN, FL 32541 US		DESTIN, FL 32541 US			ALL AHASSEE, FLORIDA				
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			08242007	Chg-P	CR2E034 (	(12/06)	
City & State		City & State			4. FEI Number 59-31784	169			plied For t Applicable
Zip	Country	Zip	Coun	try	5. Certificate of	Status Desired		. <b>75</b> Add Required	
	Registered Agent	1		7. Name and A	ddress of New R		<u> </u>		
		Name							
VEACH, KERRY 34894 EMERALD COAST PARKWAY				Street Address (P.O. Box Number is Not Acceptable)					
DESTIN, F	·L 32541								
				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									
Amended AR is \$61.25  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees									
10.	OFFICERS AND		ADDITIONS/CI	HANGES TO OFF	CERS AND DIE	RECTORS			
TITLE	D	☐ Delete	TITLE		۸ ,		<del></del>	Change	Addition
NAME STREET ADDRESS	VEACH, KERRY   34894 EMERALD COAST PKWY		NAM STRE	E ET ADDR <b>é</b> ss	H-2 ~ /				ļ
CITY-ST-ZIP	DESTIN, FL 32541			-ST-ZIP	19/11		<u> </u>		
TITLE NAME	D VEACH, KEVIN	☐ Delete	TITLE NAM		0 4			Change	Addition
STREET ADDRESS				ET ADDRESS /	,				ļ
CITY-ST-ZIP	DESTIN, FL 32541			-SI-ZIP	<del></del> -				
TITLE NAME	SHOULTS, MICHAEL	☐ Delete	TITLI NAM		س رسین رست		_	Change	Addition
STREET ADDRESS CITY-ST-ZIP	34894 EMERALD COAST PKWY DESTIN, FL 32541			ET ADDRESS -ST-ZIP	09/18/0	0 <b>109</b> 5: !?01072-	크라크트! -025 **	 70.00	
TITLE	D	☐ Delete	TITU	<del></del>	<u> </u>			Change	Addition
NAME	SHOULTS, BRAD		NAM						_
STREET ADDRESS City-St-Zip	34894 EMERALD COAST PKWY DESTIN, FL 32541	•		ET ADDRESS - ST-ZIP					
TITLE		☐ Delete	TITL	Ţ;	ce Presi	dent		Change	Addition
NAME STREET ADDRESS			MAM	ET ADDRESS 3 C	eyery Ne	5'11 Ked	<b>ゼ</b> ニ〉		·
CITY-ST-ZIP				-ST-ZIP F+	ce Presi egory Ne Bayour Walter	Reach	EC 3.	25	47
TITLE NAME		☐ Delete	TITL	E				Change	Addition
STREET ADDRESS			NAM STRE	ET ADORESS					
CITY-ST-ZIP				-ST-ZIP					
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.									