2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: __

FILED DOCUMENT # P93000029857 Apr 26, 2007 08:00 AM 1. Entity Name FRETWELL REALTY, INC. **Secretary of State** Principal Place of Business Mailing Address 104 LACOSTA LANE STE 120 PO BOX 10987 DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32120 US 02052007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3186648 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FRETWELL, M G DO NOT WRITE 104 LA COSTA LANE **SUITE 120** IN THIS SPACE DAYTONA BEACH, FL 32114 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PIDS TITLE FRETWELL, M G NAME STREET ADDRESS PO BOX 10987 CITY-ST-ZIP DAYTONA BEACH, FL 32120 TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE JITLE NAME STREET ADDRESS CITY - ST - ZIP NAME STREET ADDRESS 000000733032 CITY-ST-ZIP 495/09/67-80070-020 150**.00** TITLE NAME STREET ADDRESS 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.

IE OF SIGNING OFFICER OR DIRECTOR