

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000065245

FILED  
Mar 13, 2009  
Secretary of State

Entity Name: HANNOVER RE REAL ESTATE HOLDINGS, INC.

**Current Principal Place of Business:**

200 S. ORANGE AVE.  
#1920  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

**Current Mailing Address:**

200 S. ORANGE AVE.  
#1920  
ORLANDO, FL 32801 US

**New Mailing Address:**

FEI Number: 59-3207180      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WALTERS, MALLORY  
200 S. ORANGE AVE.  
#1920  
ORLANDO, FL 32801 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: DP ( ) Delete  
Name: DECKER, RAINER  
Address: HOHENZOLLERNRING 72  
City-St-Zip: COLOGNE GERMANY 50672,

Title: DST ( ) Delete  
Name: BRAZIEL, DENNIS D  
Address: ONE CITRUS BOWL PLACE  
City-St-Zip: ORLANDO, FL 32805

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: BRAZIEL, DENNIS D  
Address: ONE CITRUS BOWL PLACE  
City-St-Zip: ORLANDO, FL 32805

Title: DVP (X) Change ( ) Addition  
Name: SEGLER, GERALD  
Address: KARL-WIECHERT-ALLEE50  
City-St-Zip: HANNOVER, DE 30625 DE

Title: DVP ( ) Change (X) Addition  
Name: HIELSCHER, PETER  
Address: HOHENZOLLERNRING 72  
City-St-Zip: COLOGNE, DE 50672 DE

Title: ST ( ) Change (X) Addition  
Name: WALTERS, MALLORY D  
Address: 200 S. ORANGE AVENUE, SUITE 1920  
City-St-Zip: ORLANDO, FL 32801 US

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: MALLORY D. WALTERS

ST

03/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date