## FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 17, 2006 08:00 AM **Secretary of State DOCUMENT # P93000068985** 1. Entity Name REAL ESTATE INFORMATION SERVICES, INC. Principal Place of Business Mailing Address P.O. BOX 811929 1181 SO. ROGERS CIRCLE BOCA RATON, FL 33481-1929 #33 BOCA RATON, FL 33487 01122006 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 65-0445088 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BEITLER, TODD 1181 SO, ROGERS CIRCLE #33 BOCA RATON, FL 33487 3. 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 famillar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE BEITLER, TODD NAME STREET ADDRESS 1181 SO. ROGERS CIRCLE #33 CITY-ST-ZIP BOCA RATON, FL 33487 U00000387478 01/19/06-80042-004 150.00 713) F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CATY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP τιπε NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 trusted 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

**FILED** 

Devtime Phone #

Date