2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 13, 2007 08:00 AM Secretary of State DOCUMENT # P95000003095 1. Entity Name FIRST REALTY SERVICES, INC. Principal Place of Business Mailing Address 314 PLEASANT ST **PO BOX 377 WILLIMANTIC CT 06226** WILLIMANTIC CT 06226 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State 4. FEI Number City & State Applied For 65-0548396 Not Applicable Ζıp Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GAUTHIER, DAVID J 722 CORTURO DR, STE B Street Address (P.O. Box Number is Not Acceptable) SUN CITY CENTER FL 33573 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Change ☐ Addition Delete HITTE GARDINER, ROBERT B NAME U00000704498 314 PLEASANT ST STREET ADDRESS STREET ADDRESS 04/23/07-80013-016 150.00 WILLIMANTIC CT 06226 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition GARDINER, JACQUELINE C NAME 314 PLEASANT ST STREET ADDRESS STREET ADDRESS WILLIMANTIC CT 06226 CITY-ST-ZIP CITY - S1- ZiP THEE Delete TITLE ☐ Change Addilion NAME NAME STREET ADDRESS STREET ADDRESS CIPY ST-ZIP City-St-ZiP THE ☐ Delete TITLE Change ☐ AddHion NAME: NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY - ST - ZIP ItIIF Change ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P CATY-ST-ZIP

2. Neroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; that I am an efficer 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

SIGNATURE: _

SIGNA TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/07 860-423-14/1

FILED