



**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 11, 2006 8:00 am**  
**Secretary of State**

07-19-2006 90004 015 \*\*\*150.00

|  |   |  |
|--|---|--|
| <b>DOCUMENT # R95000025360</b>   |   |   |
| 1. Entity Name<br><b>MEDFIELD REALTY &amp; INVESTMENT CORPORATION</b>  |   |  |
| Principal Place of Business<br><b>7496 COMMERCIAL CIRCLE<br/>FT PIERCE, FL 34951 US</b>  |   | Mailing Address<br><b>7496 COMMERCIAL CIRCLE<br/>FT PIERCE, FL 34951 US</b>  |
| <b>DO NOT WRITE IN THIS SPACE</b>  |   |  |
| 6. Name and Address of Current Registered Agent<br><b>DONAHUE, RICHARD E<br/>7496 COMMERCIAL CIRCLE<br/>FT PIERCE, FL 34951</b>  |   | <b>DO NOT WRITE<br/>IN THIS SPACE</b>  |
| 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 _____<br><small>Signature, typewritten printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)</small>   |   |  |
| <b>FILE NOW!! FEE IS \$150.00<br/>Due by September 6, 2006</b>   |   | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be<br/>Added to Fees</b> |
| In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.   |   |  |
| 10. OFFICERS AND DIRECTORS   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | D<br>DONAHUE, RICHARD<br>7496 COMMERCIAL CIR<br>FT PIERCE, FL 34951     |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | D<br>DONAHUE, BEVERLY<br>7496 COMMERCIAL CIR<br>FORT PIERCE, FL 34951   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | D<br>DONAHUE, RICHARD N<br>7496 COMMERCIAL CIR<br>FORT PIERCE, FL 34951 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - 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. |   |  |
| SIGNATURE:    |   | <b>8-8-06</b><br>Date  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   |   | <b>772-461-0532</b><br>Deputy Phone #  |

**RICHARD K. DONAHUE**