

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000047976

FILED
Jul 28, 2009
Secretary of State**Entity Name:** ADVANTAGE REALTY OF NORTH FLORIDA, INC.**Current Principal Place of Business:**379 W. DUVAL STREET
LAKE CITY, FL 32055**New Principal Place of Business:**2744 WEST US HWY 90
LAKE CITY, FL 32055**Current Mailing Address:**408 SW RIDGEVIEW PLACE
LAKE CITY, FL 32024**New Mailing Address:**2744 WEST US HWY 90
LAKE CITY, FL 32055**FEI Number:** 59-3324412**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**AMRHEIN, JOANNA P
408 SW RIDGEVIEW PLACE
LAKE CITY, FL 32024 US**Name and Address of New Registered Agent:**HITSON, SHIRLEY A PTS
2744 WEST US HWY 90
LAKE CITY, FL 32055 US

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: SHIRLEY HITSON

07/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: HITSON, SHIRLEY A
Address: 408 SW RIDGEVIEW PLACE
City-St-Zip: LAKE CITY, FL 32024

Title: VP () Delete
Name: AMRHEIN, FREDERICK P
Address: 408 SW RIDGEVIEW PLACE
City-St-Zip: LAKE CITY, FL 32024

Title: SEC (X) Delete
Name: AMRHEIN, JOANNA
Address: 408 SW RIDGEVIEW PLACE
City-St-Zip: LAKE CITY, FL 32024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: HITSON, SHIRLEY A
Address: 2744 WEST US HWY 90
City-St-Zip: LAKE CITY, FL 32055

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SHIRLEY HITSON

PTS

07/28/2009

Electronic Signature of Signing Officer or Director

Date