## 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## **Secretary of State** DOCUMENT # P96000005238 02-06-2006 90070 024 \*\*\*150.00 1. Entity Name LIST RIGHT REALTY, INC. Principal Place of Business Mailing Address DUUTENA A. 709 E MICHIGAN ST ORLANDO FL 32806 2003-6 OSCEOLA AVENUE ORLANDO FE 32808 2. Principal Place of Business 3. Mailing Address 709 E. Michigan St. Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE -CR2E034 (10/05) City & State City & State 4. FEI Number Applied For 59-3366480 1104 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired us 2806 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SINGER, MARILYN Street Address (P.O. Box Number is Not Acceptable) 2903 S OSCEOLA AVE ORLANDO FL 32806 Zip Code ろうえのし 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 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, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE NAME SINGER, MARILYN NAME 3405 Raeford Rd Ovlando Fl 32806 STREET ADDRESS STREET ADDRESS 2903 3 OSCEOLA AVE-CITY-ST-ZIP ORLANDO FL 32806 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME SINGER, IRENE NAME 2332 Nela Are STREET ADDRESS 123 COUNTRY CLUB RD. STREET ADDRESS Ollando FL CITY-ST-ZIP SHALIMAR EL-32570 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIT) F ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby 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 oath; 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:

Marilyn Singer 1/18/06 407 8889484

FILED

Feb 06, 2006 8:00 am