2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000051230

KLEBER, BODO

1405 SE 47TH ST #1

CAPE CORAL, FL 33904

Name:

Address:

City-St-Zip:

Entity Name: FLORIDA HOMES REALTY GROUP, INC.

FILED Apr 04, 2009 Secretary of State

	rincipal Place	of Business:	New Principal Place of Business:	
1405 SE 4	7TH ST			
UNIT 1 CAPE COI	RAL, FL 33904	1 US		
Current Mailing Address:			New Mailing Address:	
1405 SE 4	7TH ST			
UNIT 1 CAPE COI	RAL, FL 33904	1 US		
FEI Number:	: 59-3411116	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:
	BODO 7TH ST #1 RAL, FL 33904	us		
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
SIGNATU	RE:			
	Electron	ic Signature of Registered Aç	gent	Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
		. •		ES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	D, P () KOEHLER, ERN 4301 SE 1ST AV CAPE CORAL, I	Delete NST VENUE	Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTOR
Name: Address:	KOEHLER, ERN 4301 SE 1ST AV CAPE CORAL, I	Delete UST VENUE FL 33904 Delete OTHEE AVENUE	Name: Address:	
Name: Address: City-St-Zip: Title: Name: Address:	KOEHLER, ERN 4301 SE 1ST AV CAPE CORAL, I S,O () BOHRER, DOR 4301 S.E. 1ST A CAPE CORAL, I O (X) WEISS, MARCE	Delete IST VENUE FL 33904 Delete OTHEE AVENUE FL 33904 US Delete ELLA Y AVENUE NORTH	Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DOROTHEE BOHRER S 04/04/2009