2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-ZIP

SIGNATURE:

changed, or on an attachment with an address, with all other like empowered

FILED Feb 20, 2006 08:00 AM DOCUMENT # P96000060118 Secretary of State NATIVE REALTY GROUP, INC. Principal Place of Business Malling Address 255 COREY AVE. PO BOX 67128 SAINT PETERSBURG, FL 33706 SAINT PETERSBURG, FL 33736 01262006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0686750 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent KLINGEL, JOSEPH W DO NOT WRITE 255 COREY AVE. SAINT PETERSBURG, FL 33706 IN THIS SPACE 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 femillar with, and accept the obligations of registered agent. SIGNATURE. Septembrue, typnai en printest maine et regislerest agent and ille if applicable (NOTE, កិច្ចប្រជាធម្មាន Agent ស្លាប់នៅមានសុវតិនន័យមាននៃនៃញៀ DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TODE D KLINGEL, JOSEPH W MARKE STREET ADDRESS 255 COREY AVE. SAINT PETERSBURG, FL 33706 CITY-ST-ZP U00000442738 03/04/06-80030-024 150.00 STR TITLE KLINGEL, MELINDA L. NAME STREET ADDRESS 255 COREY AVE. SAINT PETERSBURG, FL 33706 CITY ST-715 TITLE MAAST STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Plorida Statutes 1 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

Davilme Phone k

OF SIGNING OFFICER OR DIRECTOR