


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000065762 1. Entity Name THE ESTUARY REAL ESTATE COMPANY, INC.	
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Principal Place of Business 105 RIVERMIST WY VERO BEACH, FL 32963 US	Mailing Address 105 RIVERMIST WY VERO BEACH, FL 32963 US
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DO NOT WRITE IN THIS SPACE



01252007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0687723	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FENNELL, TODD W ESQ. 979 BEACHLAND BLVD. VERO BEACH, FL 32963
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000615043 02/06/07-80055-020 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOERR, ROGER C 105 RIVERMIST WAY VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HAZEL, DOUGLAS E 4525 DUBOIS CREEK LANE WASHINGTON, MO 63090
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HAZEL, KAY 210 LAKE VIEW WAY VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: <u><i>Roger C. Doerr</i></u> ROGER C. DOERR, President <u>1/29/07</u> <u>772-234-4500</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>
