


2008 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 28, 2008 8:00 am
Secretary of State

01-16-2008 90021 008 ***150.00

DOCUMENT # P96000083805	
1. Entity Name O'BRIEN REALTY, INC.	

Principal Place of Business 2166 W. HWY. 30 A SUITE B SANTA ROSA BEACH, FL 32459 US	Mailing Address P.O. BOX 2115 SANTA ROSA BEACH, FL 32459
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DO NOT WRITE IN THIS SPACE



01112008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3410734	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent O'BRIEN, EDWARD JOHN 303 BLUE LAKE RD BLUE MTN BEACH, FL 32459
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**DO NOT WRITE
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 familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$350.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST O'BRIEN, EDWARD JOHN 303 BLUE LAKE ROAD SANTA ROSA BEACH, FL 32459
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IN THIS SPACE**

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: Ed J. O'Brien **2/26/08** **850-598-9444**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #