

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000088036

FILED  
Feb 04, 2009  
Secretary of State

Entity Name: AMERICAN REALTY OF CAPTIVA, INC.

## Current Principal Place of Business:

11526 ANDY ROSE LN  
CAPTIVA, FL 33924 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1133  
CAPTIVA ISLAND, FL 33924

## New Mailing Address:

P.O. BOX 1133  
CAPTIVA, FL 33924

FEI Number: 52-1996542

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, ELAINE  
11411 DICKEY LANE #7  
CAPTIVA ISLAND, FL 33924 US

## Name and Address of New Registered Agent:

SMITH, ELAINE  
11526 ANDY ROSSE LANE  
CAPTIVA, FL 33924 US

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.

SIGNATURE: ELAINE A SMITH

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NEWMAN, PATRICIA L  
Address: 1721 N ADAMS ST  
City-St-Zip: ARLINGTON, VA

Title: D ( ) Delete  
Name: DAVID & AGNES DAVIS,  
Address: 1608 N BRYAN ST  
City-St-Zip: ARLINGTON, VA

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NEWMAN, PATRICIA L L  
Address: 1721 N ADAMS ST  
City-St-Zip: ARLINGTON, VA 33924

Title: D (X) Change ( ) Addition  
Name: DAVIS, AGNES & DAVID  
Address: 1608 N BRYAN ST  
City-St-Zip: ARLINGTON, VA 33924

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.

SIGNATURE: PATRICIA L NEWMAN

PD

02/04/2009

Electronic Signature of Signing Officer or Director

Date