

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000029373

Entity Name: NOVA REALTY OF FLORIDA, INC.

FILED
Jan 16, 2008
Secretary of State

Current Principal Place of Business:

990 NORTH STATE RD 434
STE 1132
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

990 NORTH STATE RD 434
STE 1132
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

1150 CARMEL CIR
502
CASSELBERRY, FL 32707

FEI Number: 59-3443391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAFT, JOHN A III
1150 CARMEL CIRCLE #502
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CRAFT, ARLENE C +
Address: 1150 CARMEL CIR #502
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRAFT, ARLENE C +
Address: 1150 CARMEL CIR #502
City-St-Zip: CASSELBERRY, FL 32707

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: ARLENE CAROLYN CRAFT

P

01/16/2008

Electronic Signature of Signing Officer or Director

_____ Date