

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000069127

Entity Name: FLORIDA REALTY NETWORK, INC.

FILED  
Apr 10, 2008  
Secretary of State

**Current Principal Place of Business:**

6700 SOUTH FLORIDA AVENUE  
SUITE #6  
LAKELAND, FL 33813

**New Principal Place of Business:**

PO BOX 7667  
LAKELAND, FL 33807

FEI Number: 59-3461616

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALDRIDGE, J. CHANTELE  
6700 SOUTH FLORIDA AVENUE  
SUITE #6  
LAKELAND, FL 33813 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: VP ( ) Delete  
Name: ELLSWORTH, W. WM. JR.  
Address: 6700 SOUTH FLORIDA AVE., SUITE 6  
City-St-Zip: LAKELAND, FL 33813

Title: PD ( ) Delete  
Name: ALDRIDGE, J. CHANTELE  
Address: 6700 SOUTH FLORIDA AVE SUITE 6  
City-St-Zip: LAKELAND, FL 33813

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: ELLSWORTH, DORIS W  
Address: 6700 SOUTH FLORIDA AVE SUITE 6  
City-St-Zip: LAKELAND, FL 33813

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: W WM ELLSWORTH JR

VP

04/10/2008

Electronic Signature of Signing Officer or Director

Date