

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000090640

FILED  
Feb 06, 2006  
Secretary of State

Entity Name: FLORIDA REALTY OPTIONS, INC.

## Current Principal Place of Business:

332 S. PLANT AVE  
TAMPA, FL 33606 US

## New Principal Place of Business:

## Current Mailing Address:

332 S. PLANT AVE  
TAMPA, FL 33606 US

## New Mailing Address:

FEI Number: 59-3477519

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERLITA, JOANN  
332 S. PLANT AVE  
TAMPA, FL 33606 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: SDVT (X) Delete  
Name: FERLITA, JOANN  
Address: 332 S. PLANT AVE  
City-St-Zip: TAMPA, FL 33606

Title: P ( ) Delete  
Name: FERLITA, JOANN  
Address: 332 S. PLANT AVE  
City-St-Zip: TAMPA, FL 33606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PRES (X) Change ( ) Addition  
Name: FERLITA, DON  
Address: 332 S. PLANT AVE  
City-St-Zip: TAMPA, FL 33606

I hereby certify that the information supplied with this filing does not qualify for the 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: DON FERLITA

PRES

02/06/2006

Electronic Signature of Signing Officer or Director

Date