


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90103 044 ***150.00

DOCUMENT # P98000001101	
1. Entity Name SILCO REAL ESTATE EXCHANGE, INC.	

Principal Place of Business 3900 SOUTH FLORIDA AVENUE STE 302 LAKELAND FL 33813	Mailing Address 3900 SOUTH FLORIDA AVENUE STE 302 LAKELAND FL 33813
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2. Principal Place of Business - No P.O. Box # 1626 Williamsburg Square Suite, Apt. #, etc.	3. Mailing Address P.O. Drawer 6506 Suite, Apt. #, etc.
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1st MOORE CR2E034 (10/06)

City & State Lakeland, FL	City & State Lakeland, FL
Zip 33803	Zip 33807-6500
Country USA	Country USA

4. FEI Number 59-3485938	<input type="checkbox"/> 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 HUNTER, DENISE M 3900 SOUTH FLORIDA AVENUE LAKELAND FL 33813	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1626 Williamsburg Square City Lakeland FL Zip Code 33803
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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 Denise M. Hunter DATE 2-1-07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reconstituting)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	DP HUNTER, DENISE M 3900 SOUTH FLORIDA AVENUE LAKELAND FL 33813 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1626 Williamsburg Square Lakeland, FL 33803
TITLE NAME STREET ADDRESS CITY ST ZIP	D MILLER, MARY E 3900 SOUTH FLORIDA AVENUE LAKELAND FL 33813 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1626 Williamsburg Square Lakeland, FL 33803
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TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Denise M. Hunter Denise Hunter DATE 2-1-07 PHONE 863-644-7583

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR