2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000011877

Entity Name: PREMIER GROUP REALTY INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
6800 GULF ST. PETER	BLVD SBURG BEAC	H, FL 33706			
Current Ma	ailing Address	::	New Mailing Addre	New Mailing Address:	
6800 GULF ST. PETER	BLVD SBURG BEAC	H, FL 33706			
FEI Number: 59-3488047 FEI Number Applied For () FEI N			FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	ST S ERSBURG, FL		rnose of changing its register	red office or registered agent, or both,	
in the State	of Florida.	abilitis tilis statement for the pu	Those of changing its registe	red office of registered agent, or both,	
SIGNATUR					
	Electronic	c Signature of Registered Agen	t	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () I KIRBY, ELEANO 2801 66 WAY N ST PETERSBUR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I APPLE, PHILLIP 6759 1ST AVE S SAINT PETERSE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () I APPLE, GALE 1187 79TH ST S ST PETERSBUR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () [APPLE, NORMA 1187 79TH ST S ST PETERSBUR	Т	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () I HUEBNER, RON 2539 GARY CIR DUNEDIN, FL 34	#306	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PETTINELLA, JO 35 BURTS PATH		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ELEANOR P. KIRBY PD 04/26/2007