2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000025118

1. Entity Name

ASSET REALIZATION OF DUVAL COUNTY, INC.



Principal Place of Business

5401 WEST KENNEDY BLVD SUITE 751 TAMPA, FL 33609 Mailing Address

C/O GREG MORRIS 2325 ULMERTON RD., STE. 20 CLEARWATER, FL 33762

FILED May 03, 2006 8:00 am Secretary of State

05-03-2006 90221 033 ***150.00

#UUUTI3m



03142006

No Chg-P

CR2E034 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

MORRIS, GREGORY D 2325 ULMERTON ROAD, SUITE #20 CLEARWATER, FL 33762

DO NOT WRITE IN THIS SPACE

. 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					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST WOOD, RENE M 5401 WEST KENNEDY BLVD SUITE TAMPA, FL 33609	751			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MORRIS, GREGORY D 2325 ULMERTON RD., STE. 20 CLEARWATER, FL 33762				
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.					