

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000061326

FILED  
Feb 24, 2006  
Secretary of State

Entity Name: KILLIAN REAL ESTATE, INC.

**Current Principal Place of Business:**

240 107TH AVENUE  
TREASURE ISLAND, FL 33706 US

**New Principal Place of Business:**

**Current Mailing Address:**

240 107TH AVENUE  
TREASURE ISLAND, FL 33706

**New Mailing Address:**

FEI Number: 59-3524985      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KILLIAN, NANCY J  
450 TREASURE ISLAND CAUSEWAY UNIT 405  
TREASURE ISLAND, FL 33706 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: P ( ) Delete  
Name: KILLIAN, NANCY J  
Address: 405 TREASURE ISLAND CAUSEWAY UNIT 405  
City-St-Zip: TREASURE IDLAND, FL 33706

Title: VP ( ) Delete  
Name: KILLIAN, DANIEL S  
Address: 723 HEARTLAND CIRCLE  
City-St-Zip: MULBERRY, FL 33860

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

Title: PD (X) Change ( ) Addition  
Name: KILLIAN, NANCY J  
Address: 405 TREASURE ISLAND CAUSEWAY UNIT 405  
City-St-Zip: TREASURE IDLAND, FL 33706

Title: VP (X) Change ( ) Addition  
Name: KILLIAN, DANIEL S  
Address: 6019 MISSION DR  
City-St-Zip: LAKELAND, FL 33013

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: NANCY J KILLIAN

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

PD

02/24/2006

\_\_\_\_\_ Date