2007 FOR PROFIT CORPORATION

ANNUAL REPORT



FILED Feb 05, 2007 8:00 am

Secretary of State

DOCUMENT # P98000061794 02-05-2007 90087 031 ***150.00 YARDLEY REAL ESTATE, INC. Principal Place of Business Mailing Address 40009794 1970 MICHIGAN AVE 1970 MICHIGAN AVE **BUILDING D** BUILDING D COCOA, FL 32922 COCOA, FL 32922 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01302007 CR2E034 (12/06) 4. FELNumber Applied For City & State City & State 26-3415727 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YARDLEY, THOMAS H Street Address (P.O. Box Number is Not Acceptable) 1970 MICHIGAN AVENUE **BUILDING D** COCOA, FL 32922 City Zip Code 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 **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. D TITLE Change ☐ Addition TITLE ☐ Delete YARDLEY, HERBERT G NAME NAME 8401 S.E. FEDERAL HIGHWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOBE SOUND, FL 33455 CITY-ST-ZIP Director ☐ Change Addition TITLE TITLE Delete Paula Yardley 1970 Michigan Avenue NAME YARDLEY, CATHERINE A NAME 8401 S.E. FEDERAL HIGHWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOBE SOUND, FL 33455 CITY-ST-ZIP ☐ Delete HILE Change ■ Addition TITLE YARDLEY, THOMAS H NAME NAMÉ STREET ADDRESS 1970 MICHIGAN AVENUE STREET ADDRESS CITY-ST-ZIP COCOA, FL 32922 CITY-S1-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Channe TITLE Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this fliling 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 the ard 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 of changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Tromas lardle