## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 01, 2006 8:00 am Secretary of State 05-01-2006 90345 024 \*\*\*150.00

DOCUMENT # P98000077211  1. Entity Name STIRLING INTERNATIONAL REALTY NEW HOME STORE, INC.											
Principal Place of Business 249 TOWNE CENTER CIR SANFORD, FL 32771			1	Mailing Address 115 International Parkway Heathrow, FL 32746				I 10121   1711   1721   1721   1721   1721   1721   1721   1721   1721   1721   1721   1721   1721   1721   17	-   -		NO 1988   11   1086
2. Principal Place of Business				Mailing Address							
Suite, Apt. #, etc.				719 Rodel Cove			04272006 Chg-P CR2E034 (11/05)				
City & State				Lake Mary, FL		4. FEI Numb			$\vdash$	opplied For	
Zip	p Country		<del></del> -	32746 USA				of Status Desired		\$8.75 Ad	Iditional
6. Name and Address of Current F			nt Regis	tered Agent	7. Name and Address of New Registered Agent						
						Name					
SODERSTROM, ROGER W 115 INTERNATIONAL PARKWAY HEATHROW, FL 32746						Street Address (P.O. Box Number is Not Acceptable)					
:						City		·	FL	Zip Cod	de
9. The above approach antity submits this statement for the average of above.							yed agent or by	oth in the State of Fig.		<u> </u>	
<ol> <li>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.</li> </ol>											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE											
		FEE IS \$150.00 6 Fee will be \$55	0.00	Election Campaign     Trust Fund Contribu			5.00 May Be ded to Fees				
10.	. OFFICERS AND			CTORS		ADDITIONS	/CHANGES TO OFF	ICERS AND	DIRECTOR	RS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SODERSTROM, TANSEY M 115 INTERNATIONAL PARKWAY HEATHROW, FL 32746					<b>I</b>				☐ Change	☐ Addition
TITLE	D			☐ Delete	TITLE	1				Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP						ET ADDRESS ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete						☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		1				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		l				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete	CITY-	ET ADDRESS - ST-ZIP				Change	☐ Addition
12. I hereby certify that the information supplied with this filing 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.											