


2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000083308

1. Entity Name
THE CHOICE INVESTMENT PROPERTIES INC.



FILED
 07 MAY 14 PM 1:53
 DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

8715 PERKER LANE **8715 PERKER LANE**
~~TALLAHASSEE, FL 32317~~ TALLAHASSEE, FL 32317
1605 Hill Lane
Tall, FL 32311



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

1605 Hill Lane Suite, Apt. #, etc

05022007 Chg-P CR2E034 (12/06)

City & State City & State

Tall, FL City & State

Zip Country Zip Country

.32311 Country

4. FFI Number Applied For

59-3596072 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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6. Name and Address of Current Registered Agent

CHOICE, RALEIGH
8715 PERKER LANE
TALLAHASSEE, FL 32311

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 _____ DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

 \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE	P <input type="checkbox"/> Delete
NAME	CHOICE, RALEIGH
STREET ADDRESS	8715 PERKER LANE
CITY-ST-ZIP	TALLAHASSEE, FL 32311
TITLE	VP <input type="checkbox"/> Delete
NAME	NICHOLSON-CHOICE, MARIBEL
STREET ADDRESS	8715 PERKER LANE
CITY-ST-ZIP	TALLAHASSEE, FL 32311
TITLE	<input type="checkbox"/> Delete
NAME	<i>[Signature]</i>
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	600103587646
STREET ADDRESS	05/31/07--01007--002 **300.00
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 another like empowered.

SIGNATURE: *Raleigh Choice* 5/1/07 425-8506

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR