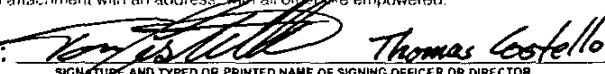


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90197 002 ***150.00

DOCUMENT # P99000003438 1. Entity Name ALDON REALTY CO.					
Principal Place of Business 137 SOUTH PEBBLE BEACH BOULEVARD SUN CITY CENTER, FL 33573			Mailing Address 137 SOUTH PEBBLE BEACH BOULEVARD SUN CITY CENTER, FL 33573		
2. Principal Place of Business Suite, Apt. #, etc. 201 City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. 201 City & State Zip Country			
4. FEI Number 59-3555464				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			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 _____ (NOTE: Registered Agent signature is required when changing name)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ACKERMAN, DON E 137 S PEBBLE BEACH BLVD STE-101 SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	137 SO. PEBBLE BEACH BLVD., STE 201	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOFFMAN, ALFRED JR 137 S PEBBLE BEACH BLVD STE-101 SUN CITY CENTER, FL 33573	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST HUTCHINSON, RICHARD 137 S PEBBLE BEACH BLVD STE-101 SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	137 SO. PEBBLE BEACH BLVD., STE. 201	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COSTELLO, TOM 137 S. PEBBLE BEACH BLVD., SUITE 201 SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	COSTELLO, THOMAS	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARRISON, THOMAS 137 S. PEBBLE BEACH BLVD., SUITE 201 SUN CITY CENTER, FL 33573	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-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, and all other officers empowered.					
SIGNATURE:  Thomas Costello 4/23/06 913-633-5886 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					