

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

2/26/2007-90071-041-\$61.25-\$61.25

**FILED**

2007 JUL 13 PM 5:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



01102007 No Chg-P CR2E034 (11/05)

**DOCUMENT # P99000004545**

1. Entry Name  
**AMERI-TRUST REALTY & MANAGEMENT, INC.**

Principal Place of Business  
1117 NE 15 AVENUE #6  
FORT LAUDERDALE, FL 33304 US

Mailing Address  
P.O. BOX 24651  
FT. LAUDERDALE, FL 33307-4651 US

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0887343**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**SPANN, RONALD T**  
2301 NE 16TH AVE  
WILTON MANORS, FL 33305-2405

**DO NOT WRITE IN THIS SPACE**

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: *Ronald T Spann* DATE: 2/21/07

Signature in block or printed name of registered agent and file 1 applicable. (NOTE: Registered Agent signature required when reselecting)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

00106650053  
07/24/07--01061--002 \*\*88.75

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SPANN, RONALD T
STREET ADDRESS	2995 NE 15TH TR
CITY - ST - ZIP	OAKLAND PARK, FL 33334
TITLE	S
NAME	SPANN, LORRAINE M
STREET ADDRESS	4050 N OCEAN DRIVE
CITY - ST - ZIP	LAUDERDALE BY THE SEA, FL 333041717
TITLE	J
NAME	CHAN, STEPHEN D
STREET ADDRESS	1105 WESTLAKE STREET
CITY - ST - ZIP	HOLLYWOOD, FL 330190000
TITLE	NP
NAME	WALTER RUBEL
STREET ADDRESS	1712 NE 16th AVE.
CITY - ST - ZIP	Fort Lauderdale FL 333
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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.

SIGNATURE: *Ronald T Spann* DATE: 2/21/07 9542708071

Signature and Title of Registered Agent or Director Date Daytime Phone #

*Handwritten initials*