## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000019037

Entity Name: VALCO REAL ESTATE GROUP, INC.

FILED Jul 15, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2203 N. LOIS AVE. 7320 E FLETCHER AVE

SUITE 937 160 TAMPA, FL 33607 TAMPA, FL 33637

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Current Mailing Address: New Mailing Address:

2203 N. LOIS AVE. 7320 E FLETCHER AVE SUITE 937 160

TAMPA, FL 33607 TAMPA, FL 33637

FEI Number: 59-3562160 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEVY, BUDDY J COFFILL, JOHN E
2203 N. LOIS AVE. 7320 E FLETCHER AVE
SUITE 912 160
TAMPA, FL 33607 US TAMPA, FL 33637 US

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.

SIGNATURE: JOHN COFFILL 07/15/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD ( ) Delete Title: VPD (X) Change ( ) Addition

Name:LEVY, BUDDY JName:DONNA, VALVERDEAddress:2203 N. LOIS AVE., SUITE 912Address:7320 E FLETCHER AVE SUITE 160

City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33637

Title: PD () Delete Title: PD (X) Change () Addition

Name: COFFILL, JOHN Name: COFFILL, JOHN

Address: 2203 N. LOIS AVE., SUITE 937 Address: 7320 E FLETCHER AVE SUITE 160

City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33637

Title: VPD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 VAVERDE, DONNA
 Name:

 Address:
 4107 SALTWATER BLVD.
 Address:

 City-St-Zip:
 TAMPA, FL 33615
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN COFFILL PRES 07/15/2008