

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # S40891 1. Entity Name DONNA HANAUER REALTY AND DEVELOPMENT CORP.	
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Principal Place of Business 5477 SE MAJOR WAY STUART, FL 34997 US	Mailing Address 5477 SE MAJOR WAY STUART, FL 34997 US
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02012006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0254520	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HANAUER, DONNA 5477 SE MAJOR WAY STUART, FL 34997	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

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	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST HANAUER, DONNA 5477 SE MAJOR WAY STUART, FL 34997
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANAUER, DONNA 5477 SE MAJOR WAY STUART, FL 34997
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO HANAUER, RONALD J. 5477 SE MAJOR WAY STUART, FL 34997
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**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: Donna Hanauer Donna Hanauer 4606 (172) 215-0237
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #