#### 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

# **FILED** Mar 16, 2007 8:00 am Secretary of State

DOCUMENT # V41145  1. Entity Name PRO REALTY CONSULTANTS, INC.							03-16-2007 90043 004 ***150.00				
Principal Place of Business 6639 SOUTH POINT PKWY			Mailing Address 6639 SOUTH POINT PKWY								
106 Jacksonville, FL 32216 US			106 Jacksonville, FL 32216 US					DI BOLITA DE ALIGIA BIGOS DIL		8/8/1 8/8/1 818	
4/8	1/ 204	PSS - NO P.O. BOX #		Vhp	wint a	2RE	z				
Suite, Apt. #, etc.  400  City & State		Suite_Apt. #, etc.  HOO  City & State			_	02262007 Chg-P CR2E03		CR2E03	4 (12/06)	oplied For	
JACKSON VILLE FL		JBCKSON VILL		LLP	72	59-3127	<b>7</b> 265	•	No	t Applicable	
372	14 Name (	and Address of Current Ro	3 22 14		Ša_			of Status Desired	F	8.75 Add ee Require	
		and Address of Current In	agistered Agent	-	Name		/. Name and /	Address of New F	legisterea A	gent	
LEWIS; MURRAY A 6639 SOUTHPOINT PKWY SUITE 106					Street Address (P.O. Box Number is Not Acceptable)						
JACKSON		32216									
<u> </u>					City				FL	Zip Cod	
8. The above the obligat	named entity tions of registe	submits this statement for t red agent.	the purpose of changing its	registere	d office or re	egistered	d agent, or both	n, in the State of Fk	orida. I am fa	miliar with,	and accept
SIGNATURE_	Signature, typed o	r printed name of registered agent and	d title if applicable. (NOTE	E: Registered	d Agent signature r	ren ired w			DATE		
	_						nen reinstating)		DATE		
		FEE IS \$150.00 Fee will be \$550.00	9. Election Campai	ign Finan		\$5.0	May Be		DATE		
Fill After Ma	ay 1, 2007		S. Election Campai     Trust Fund Contr IRECTORS	ign Finandribution.	ncing	\$5.0	<b>0</b> May Be I to Fees	CHANGES TO OFF	FICERS AND I		
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r nereby 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.

Vic Key A. Lewis PSDT 3-13-07 904-296-099

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## ATTACHMENT 20007856

### **Division of Corporations**

#### **Annual Report**

V41145

No

593127265

PRO REALTY CONSULTANTS, INC.

**Document Number** 

**Business Entity Name** 

FEI Number

**FEI Number Status** 

Certificate of Status Desired

**Election Campaign Financing Trust Fund Contribution** No

**Principal Place of Business** 

Address

4181 SOUTH POINT DRIVE EAST

Suite, Apt. #, etc.

400

City, State

JACKSONVILLE, FL

Zip Code & Country 32216 US

Mailing Address

Address

4181 SOUTH POINT DRIVE EAST

Suite, Apt. #, etc.

400

City, State

JACKSONVILLE, FL

Zip Code & Country 32216 US

Name and Address of Registered Agent

Name (Last, First, Middle, Title) LEWIS, MURRAY A.,, MGR.

**Address** 

4181 SOUTHPOINT DRIVE EAST

Suite, Apt. #, etc.

SUITE 400

City, State

JACKSONVILLE, FL

Zip Code & Country

32216 US

Registered Agent Signature

**MURRAY A. LEWIS** 

Officer/Director Name and Address

**PSDT** 

Name (Last, First, Middle, Title) VICKEY A., LEWIS, PSDT

**Street Address** 

4181 SOUTHPOINT DRIVE EAST SUITE 400

City, State

JACKSONVILLE, FL

Zip Code & Country

32216

ATTACHMENT 20007856 # 141145

Title

4 12 1

**PSDT** 

Officer/Director Signature VICKEY A. LEWIS

Continue

Start Over