## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 576851**

PHILLIPS, PHILLIP

95 ROCKPORT RD.

WESTON, MA 02493

Name:

Address: City-St-Zip:

Entity Name: PHILLIPS REAL ESTATE INVESTMENTS, INC.

FILED May 05, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 95 ROCKPORT ROAD WESTON, MA 02493 **Current Mailing Address: New Mailing Address:** 95 ROCKPORT ROAD WESTON, MA 02493 FEI Number: 04-2660488 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: STONE, STEPHEN M 322 EAST PINE STREET ORLANDO, FL 32801 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: 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: ( ) Delete () Change () Addition COSTA PHILLIPS Name: Name: 95 ROCKPORT ROAD Address: Address: City-St-Zip: WESTON, MA 02493 City-St-Zip: Title: DS Title: () Change () Addition () Delete Name: FIFI PHILLIPS Name: 95 ROCKPORT ROAD Address: Address: WESTON, MA 02493 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: COSTA PHILLIPS PTD 05/05/2009