

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000089174

FILED  
Apr 12, 2011  
Secretary of State

Entity Name: 100% REALTY, INC.

**Current Principal Place of Business:**

144 MARY ESTHER BLVD  
SUITE 12  
MARY ESTHER, FL 32569 US

**New Principal Place of Business:**

**Current Mailing Address:**

144 MARY ESTHER BLVD  
SUITE 12  
MARY ESTHER, FL 32569 US

**New Mailing Address:**

FEI Number: 59-3343607      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVIS, ROBIN D  
117 TRAILWOOD LANE  
CRESTVIEW, FL 32539 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: VPD  
Name: LICARI, CHARLES J  
Address: 343 SHANNON COURT  
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: PD  
Name: DAVIS, ROBIN D  
Address: 117 TRAILWOOD LANE  
City-St-Zip: CRESTVIEW, FL 32539

Title: DT  
Name: KRAHENBUHL, DAVID W  
Address: 329 OLDE POST RD.  
City-St-Zip: NICEVILLE, FL 32578

Title: DS  
Name: KRAHENBUHL, DONNA L  
Address: 329 OLDE POST RD.  
City-St-Zip: NICEVILLE, FL 32578

Title: VP  
Name: HICKENBOTHAM, RICHARD J  
Address: 139 WALTON WAY  
City-St-Zip: FORT WALTON BEACH, FL 32548

I hereby 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 all other like empowered.

SIGNATURE: ROBIN D DAVIS

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04/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date