

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
-Feb 03, 2004 08:00 AM
Secretary of State

DOCUMENT # F25647

1. Entity Name
REGENCY CENTRE INVESTMENTS, INC.



Principal Place of Business
8202 CLEARVISTA PKWY
BLDG 1, SUITE F
INDOLS, IN 46256 US

Mailing Address
8202 CLEARVISTA PKWY
BLDG 1, SUITE F
INDOLS, IN 46256 US



DO NOT WRITE IN THIS SPACE

01202004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2069019 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, E. JOHN
1819 MAIN ST. SUITE 610
SARASOTA, FL 34236

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IN THIS SPACE**

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, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00** May Be
Added to Fees

000000032118
02/04/04-80176-018 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME POLAK, BRADLEY T
STREET ADDRESS 8202 CLEARVISTA PKWY #1F
CITY-ST-ZIP INDIANAPOLIS, IN

TITLE SD
NAME POLAK, REBECCA
STREET ADDRESS 8202 CLEARVISTA PKWY #1F
CITY-ST-ZIP INDIANAPOLIS, IN 46256

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Bradley T. Polak* President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-04 Date

317-842-0600 Davitts Photo #