


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2004 08:00 AM
Secretary of State

DOCUMENT # G44818 1. Entity Name SCHMIER & FEURRING PROPERTIES, INC.	
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Principal Place of Business 7777 GLADES RD., STE 310 BOCA RATON FL 33434-1150	Mailing Address 7777 GLADES RD., STE 310 BOCA RATON FL 33434-1150
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MOORE CR2E034 (11/03)

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State		
Zip	Country	Zip	Country

4. FEI Number 59-2299287	Applied For <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent SCHMIER, ROBERT J. 7777 GLADES ROAD, STE 310 BOCA RATON FL 33434	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> Delete PD SCHMIER, ROBERT J 7777 GLADES RD STE 310 BOCA RATON FL
TITLE	<input type="checkbox"/> Delete CEOS FEURRING, DOUGLAS R 7777 GLADES RD STE 310 BOCA RATON FL
TITLE	<input type="checkbox"/> Delete T LOPEZ, KATHRYN A. 7777 GLADES RD STE 310 BOCA RATON FL
TITLE	<input type="checkbox"/> Delete V SCHMIER, BRIAN S 7777 GLADES ROAD, SUITE 310 BOCA RATON FL
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000000133066 04/27/04-80073-018 158.75
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  Robert J. Schmier 4/22/04 561-483-8400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #