

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000078037

FILED
Feb 24, 2004
Secretary of State

Entity Name: SEVEN GABLES REALTY, INC.

Current Principal Place of Business:

4312 N. PARK
TAMPA, FL 33624 US

New Principal Place of Business:

Current Mailing Address:

4312 N. PARK
TAMPA, FL 33624 US

New Mailing Address:

FEI Number: 65-0533110 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGELO, CHRISTOPHER
4415 CARROLLWOOD VILLAGE DR
TAMPA, FL 33624 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: ANGELO, CHRISTOPHER
Address: 4415 CARROLLWOOD VILLAGE DR
City-St-Zip: TAMPA, FL 33624

Title: P () Delete
Name: ANGELO, NICKOLAS
Address: 12504 NETTLE CREEK RD
City-St-Zip: TAMPA, FL 33624

Title: VP () Delete
Name: ANGELO, NICKOLAS J
Address: 4312 NORTH PARK DRIVE
City-St-Zip: TAMPA, FL 33624

Title: T () Delete
Name: ANGELO, MARIE MADELEIN
Address: 4312 NORTH PARK DRIVE
City-St-Zip: TAMPA, FL 33624

Title: S () Delete
Name: ANGELO, CHRISTOPHER
Address: 4312 NORTHGATE DRIVE
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: CHRISTOPHER ANGELO

S

02/24/2004

Electronic Signature of Signing Officer or Director

_____ Date