2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

CITY-ST-78P

SIGNATURE: _

Mar 23, 2004 8:00 am Secretary of State **DOCUMENT # 301333** 1. Entity Name 03-23-2004 90010 045 ***150 00 DAVEY REALTY, INC. Principal Place of Business Mailing Address 2737 E. OAKLAND PARK BLVD. 2737 E. OAKLAND PARK BLVD. FT. LAUDERDALE FL 33306 US FT. LAUDERDALE FL 33306 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) Applied For City & State City & State 4. FEI Number NO-T APPLICABLE Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CARLON JR, JOHN T Street Address (P.O. Box Number is Not Acceptable) 2701A E. OAKLAND PK.BLVD FORT LAUDERDALE FL 33306 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Change ☐ Defete ☐ Addition NAME DAVEY, SCOTT R. NAME 2348 SE 13TH COURT STREET ADDRESS STREET ADDRESS POMPANO BEACH FL City-St-ZIP CITY-ST-ZIP TITLE PD ☐ Delete TITLE ☐ Change ☐ Addition DAVEY, GORDON . NAME NAME 2348 SEV13 CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POMPANO BCH, FL 00000 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition CARLON, JR JOHN T STREET ADDRESS 2737 E. OAKLAND PARK BLVD. STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33306 CITY-ST-ZIP SD TITLE ☐ Delete ☐ Change Addition DAVEY, LORINE NAME NAME 2348 SE 13 CT STREET ADDRESS STREET ADDRESS POMPANO BCH FL 33062 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-Z/P TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP

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.

FILED