


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90538 026 ***150.00

DOCUMENT # 549507 1. Entity Name JOAN COLLINS REALTY, INC.																									
Principal Place of Business 500 S. FAIRFIELD DR PENSACOLA, FL 32506			Mailing Address 500 S. FAIRFIELD DR PENSACOLA, FL 32506																						
2. Principal Place of Business		3. Mailing Address																							
Suite, Apt. #, etc.		Suite, Apt. #, etc.																							
City & State		City & State																							
Zip		Country		Zip																					
Country		Country		Country																					
6. Name and Address of Current Registered Agent COLLINS, JOAN S 500 S. FAIRFIELD DR PENSACOLA, FL 32506				7. Name and Address of New Registered Agent Name Collins, GRUBY E. Street Address (P.O. Box Number is Not Acceptable) 500 SOUTH FAIRFIELD DRIVE City PENSACOLA FL 32506																					
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 GRUBY E. COLLINS DATE 4-23-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)</small>																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																						
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">NAME</td> <td style="width:10%;">STREET ADDRESS</td> <td style="width:10%;">CITY-ST-ZIP</td> <td style="width:10%; text-align: center;"> <input checked="" type="checkbox"/> Delete </td> </tr> <tr> <td></td> <td>P COLLINS, JOAN S</td> <td>321 SOUTH 73RD AVENUE</td> <td>PENSACOLA, FL</td> <td></td> </tr> </table>			TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete		P COLLINS, JOAN S	321 SOUTH 73RD AVENUE	PENSACOLA, FL		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">NAME</td> <td style="width:10%;">STREET ADDRESS</td> <td style="width:10%;">CITY-ST-ZIP</td> <td style="width:10%; text-align: center;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td></td> <td>P COLLINS, GRUBY E.</td> <td>321 SOUTH 73RD AVE</td> <td>PENSACOLA, FLORIDA</td> <td></td> </tr> </table>			TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		P COLLINS, GRUBY E.	321 SOUTH 73RD AVE	PENSACOLA, FLORIDA	
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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: GRUBY E. COLLINS <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 4-23-04 Daytime Phone # 850-455-1381																						