

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 01, 2004 8:00 am**  
**Secretary of State**

05-10-2004 90454 022 \*\*\*150.00

**DOCUMENT # F02000000929**

1. Entity Name  
**BARCAP REALTY SERVICES GROUP, INC.**



Principal Place of Business  
**3570 US HWY 98 N  
LAKELAND, FL 33809**

Mailing Address  
**3570 US HWY 98 N  
LAKELAND, FL 33809**

**66425289**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04272004

Chg-P

CR2E034 (10/03)

4. FEI Number  
**58-2454697**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MILLER, J. STEPHEN  
APT 120  
1969 CRYSTAL GROVE DR  
LAKELAND, FL 33801**

Name **Baron Capital IV, Inc.**

Street Address (P.O. Box Number is Not Acceptable)

**3570 US Hwy 98 N**

City **Lakeland**

FL

Zip Code  
**33809**

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

*J. Stephen Miller FOR Baron Capital IV Inc*

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**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME **PD ASTORINO, ROBERT L** ☒ Delete  
STREET ADDRESS  
CITY-ST-ZIP **3570 US HWY 98 N  
LAKELAND, FL 33809**

TITLE  
NAME **P Jarome S. Rydell** ☐ Change ☒ Addition  
STREET ADDRESS  
CITY-ST-ZIP **3570 US Hwy 98 N  
Lakeland FL 33809**

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME **V J. Stephen Miller** ☐ Change ☒ Addition  
STREET ADDRESS  
CITY-ST-ZIP **3570 US Hwy 98 N  
Lakeland FL 33809**

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
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.

SIGNATURE:

*J. Stephen Miller*  
**J. STEPHEN MILLER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/28/04**  
Date

**863-853-2882**  
Daytime Phone #