

2004 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90291 009 ***150.00

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03302004 Chg-P CR2E034 (10/03)

4. FEI Number **59-2202815** Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DOCUMENT # F86268

1. Entity Name
WALL STREET PROPERTIES, INC.



Principal Place of Business
**1600 W. SUNRISE BLVD.
FORT LAUDERDALE, FL 33311**

Mailing Address
**3530 NE 23RD AVE
#8
LIGHTHOUSE POINT, FL 33064**

2. Principal Place of Business

3. Mailing Address
261 NW 16 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Pompano Beach, Fl

Zip

Country

Zip
33060

Country
USA

6. Name and Address of Current Registered Agent

**MARSH, GORDON J SR
3530 NE 23RD AVE
#8
LIGHTHOUSE POINT, FL 33064**

7. Name and Address of New Registered Agent

Name
BRUTTELL, Janet
Street Address (P.O. Box Number is Not Acceptable)
261 NW 16 Street
City
Pompano Beach FL Zip Code
33060

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 **Janet Bruttell** DATE **3/30/04**
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**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
**MARSH, GORDON J SR.
3530 NE 23RD AVE
LIGHTHOUSE POINT, FL 33064** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
**Marsh, Gordon J Jr.
1810 Marshall Road
Wetumpka, AL 36093** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
**Nancy Gale
261 NW 16 Street
Pompano Beach, Fl 33060** ☐ Change ☒ Addition

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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: **Nancy Gale** **Nancy Gale, Vice President** DATE **3/30/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #