


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90101 048 ***150.00

DOCUMENT # G33473 1. Entity Name ALMAR REALTY, INC.	
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Principal Place of Business 1314 CAPE CORAL PKWY E. SUITE 322 CAPE CORAL, FL 33904 US	Mailing Address 1314 CAPE CORAL PKWY E. SUITE 322 CAPE CORAL, FL 33904 US
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02222004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2279189	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent ROGAHN, GUNTHER 4413 SW 2ND AVENUE CAPE CORAL, FL 33914
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**DO NOT WRITE
IN THIS SPACE**

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

03/09/04

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	D ALLEN, BEVERLY 1314 CAPE CORAL PKWY CAPE CORAL, FL 33904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALLEN, BEVERLY J 11066 MATLACHA AVE MATLACHA, FL 33993
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BUERGLE, HEINZ 3009 SW 4TH PL. CAPE CORAL, FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS ROGAHN, WALTRAUT J 4413 SW 2ND AVENUE CAPE CORAL, FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

Waltraut J. Rogahn, PTS

3/03/04