## **2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

1. Entity Nam	MENT # <b>G79393</b> G REALTY, INC.				Feb 21, 2005 08:00 AN Secretary of State	V]
Principal Place of Business  2201 CANTU CT SUITE 104 SARASOTA FL 34232 US		Mailing Address  2201 CANTU CT SUITE 104 \$ARASOTA FL 34232 US				
2. Principal P	Place of Business	3. Mailing Addres	S			
Suite, Apt. #, etc		Suite, Apt. #, etc.			1st MOORE CR2E034 (10/04)	
City & State		City & State			4. FEI Number 59-2364306 Applied For Not Applicable	e
Zip	Country	Zip	Coun	try	5. Certificate of Status Desired See Required Fee Required	
	6. Name and Address of Curren	t Registered Agent		Name	7. Name and Address of New Registered Agent	_
GAI	JSE, W. PEYTON ESQ			Name		_
220	1 CANTU COURT		•	Street Address	(P.O. Box Number is Not Acceptable)	
	TE 104 RASOTA FL 34232					
				City	FL Zip Code	
8. The above the obligat	named entity submits this statement tions of registered agent.	or the purpose of char	nging its registere	ed office or registe	ered agent, or both, in the State of Florida I am familiar with, and accep	t
SIGNATURE	Signature, typod or printed name of registered agen	it and title d applicable	(NOTE Registere	d Agent signature require	od when reinstating) DATE	
After	ILE NOW!!! FEE IS \$150.00 May 1, 2005 Fee Will Be \$550.0	0			9. Election Campaign Financing \$5.00 May Br Trust Fund Contribution. Added to Fees	 e
	k Payable to Florida Department					
10. TITLE	OFFICERS AND	DIRECTORS Del	11.	:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	 on
NAME	STARLING, FRED M	· 11 DBI	NAM		02/21/05-90075-916 150.00	
STREET ADDRESS CITY-ST-ZIP	2201 CANTU CT STE 104 SARASOTA FL			ET ADDRESS - ST- 7IP	02/21/05-80012-816 120.00	
TITLE	PS	. Del		1	☐ Change ☐ Addillo	'n
NAME STREET ADDRESS	CLAYTON, ANN 2201 CANTU CR STE 140		NAM STRE	F ET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		спу	-ST-ZIP		_
TITLE	DT —	☐ Del		ŀ	☐ Change ☐ Additio	λΠ
NAME STREET ADDRESS	BEST, MARTHA 2201 CANTU CR STE 140		NAM STRE	FT ADDRESS		
CITY-ST-ZIP	SARASOTA FL		CITY	-ST-ZIP		
TITLE		☐ Del			☐ Change ☐ Addition	អា
NAME Street Address			NAM STRE	ET ADDRESS		
CITY-ST-ZIP			CITY	-51-2P		
TITLE		☐ Del			☐ Change ☐ Addition	П
NAME STREET ADDRESS			NAM Stre	ET ADDRESS		
CITY-ST-ZIP			CITY	- ST - ZIP		
HILE		☐ Del		i i	☐ Change ☐ Addition	ЭП
NAME STREET ADDRESS			NAM STRE	E Et address		
CITY-ST-ZIP				-ST-ZIP		
12. I hereby indicated of the conchanged	certify that the information supplied will on this report or supplemental report reporation or the receiver or trustee emit, or on an attachment with arreddress.	is true and accurate a powered to execute this with all other like emp	nd that my signa is report as requi powered	ture shall have the red by Chapter 60	Section 119.07(3)(i), Florida Statutes. I further certify that the information a same legal effect as if made under oath; that I am an officer or director 07, Florida Statutes, and that my name appears in Block 10 or Block 11 in the certification of the certifi	f
CICNIAT	FLIDE.	/ FREI	M. STAR	LING, PRES	S. 2/16/05 941-378-3811	

FRED M. STARLING, PRES. 2/16/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_

Daytme Phone #