

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03/31/04 90001 033 \$150.00



MOORE CR2E034 (11/03)

DOCUMENT # H32346

1. Entity Name
URBANWEST REALTY, INC.



Principal Place of Business Mailing Address

12393 70TH PLACE NO
WEST PALM BEACH FL 33412 12393 70TH PLACE NO
WEST PALM BEACH FL 33412

2. Principal Place of Business 3. Mailing Address

12545 ORANGE BLVD **12545 ORANGE BLVD**

Suite, Apt. #, etc Suite, Apt. #, etc

City & State City & State

W P B, FL **W P B, FL**

Zip Country Zip Country

33412 **PALM BCH** **33412** **PALM BCH**

4. FEI Number Applied For

59-1896879 Not Applicable

5. Certificate of Status (Desired) \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MACLEOD, JANET
12820 SHORE DR.
PALM BCH GARDENS FL

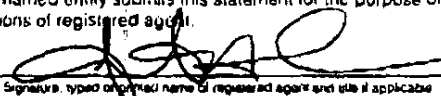
7. Name and Address of New Registered Agent

Name: **Macleod, Janet**

Street Address (P.O. Box Number is Not Acceptable): **12545 Orange Blvd**

City: **West Palm Beach FL** Zip Code: **33412**

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:  DATE: **3/4/04**

Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when remaining)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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	PSD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MACLEOD, JANET A	NAME	
STREET ADDRESS	12820 SHORE DR.	STREET ADDRESS	
CITY-ST-ZIP	PALM BCH GARDENS FL	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

URBANWEST REALTY, INC
NOTIFY SENDER OF NEW ADDRESS
12545 ORANGE BLVD
WEST PALM BEACH FL 33412-1413
01/31/04

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:  DATE: **4/22/04** (201) 798-5277

Signature: typed or printed name of signing officer or director Date (Maximum 11 characters)