# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2004**
**Secretary of State**

DOCUMENT# H51149

**Entity Name:** FIRST AMERICAN PROPERTIES CORPORATION

**Current Principal Place of Business:**

1501 SHEPHERD RD
#5
LAKELAND, FL 33811 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 6271
P. O. BOX 6271
LAKELAND, FL 338076271 US

**New Mailing Address:**

1501 SHEPHERD ROAD, #5
STE #5
LAKELAND, FL 33811 US

**FEI Number: 59-2514963** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HODGES, CARLTON
222 WOOD HALL DRIVE
MULBERRY, FL 33860

**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete
Name: HODGES, CARLTON D.,
Address: 222 WOODHALL DR
City-St-Zip: MULBERRY, FL

Title: DS ( ) Delete
Name: BLAKE, WENDELL O.,
Address: 5514 KINGS MONT DR.
City-St-Zip: LAKELAND, FL

Title: AD ( ) Delete
Name: PINES, JACK,
Address: 2345 COLLINS LANE
City-St-Zip: LAKELAND, FL

Title: C ( ) Delete
Name: OWENS, THOMAS A. JR.,
Address: 3000 ROYAL MARCO WAY 615
City-St-Zip: MARCO ISLAND, FL

Title: D ( ) Delete
Name: WENDEL, JOHN F.,
Address: 5300 S. FLORIDA AVENUE
City-St-Zip: LAKELAND, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLTON D HODGES PTD 04/30/2004

Electronic Signature of Signing Officer or Director Date