**FILED**
**May 03, 2004 08:00 AM**
**Secretary of State**

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J20859

1. Entity Name
JIM EYSTER REALTY, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| % JAMES P. EYSTER<br>7655 W. GULF TO LAKE HWY. #14<br>CRYSTAL RIVER, FL 34429 US | % JAMES P. EYSTER<br>7655 W. GULF TO LAKE HWY. #14<br>CRYSTAL RIVER, FL 34429 US |

**DO NOT WRITE IN THIS SPACE**

04262004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2747854
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EYSTER, JAMES P
7655 W. GULF TO LAKE HWY.
SUITE 14
CRYSTAL RIVER, FL 34429

**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: _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when mail/faxing)

**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 | DP |
| NAME | EYSTER, JAMES P |
| STREET ADDRESS | 7655 W. GULF TO LAKE HWY |
| CITY-ST-ZIP | CRYSTAL RIVER, FL |
| TITLE | D |
| NAME | EYSTER, JOAN A |
| STREET ADDRESS | 7655 W GULF TO LAKE HWY |
| CITY-ST-ZIP | CRYSTAL RIVER, FL |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
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| 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:** James P Eyster 4-29-04 352-795-6986
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #