

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # J46319
 1. Entity Name
 PEARL APARTMENTS, INC.



Principal Place of Business Mailing Address
 4949 E. ANNA-JO DRIVE 4949 E. ANNA-JO DRIVE
 INVERNESS, FL 34452 INVERNESS, FL 34452



02192005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2763467 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 RANCOURT, PAULINE
 6020 E. TENISON STREET
 INVERNESS, FL 34452

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1000000346533
 04/30/05-80073-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	RANCOURT, DANIEL
STREET ADDRESS	RT114
CITY-ST-ZIP	CANAAN, VT
TITLE	PTM
NAME	RANCOURT, PAULINE
STREET ADDRESS	6020 E TENISON ST
CITY-ST-ZIP	INVERNESS, FL 34452
TITLE	VD
NAME	MCBRIDE, JANE
STREET ADDRESS	540 GENTIAN ROAD
CITY-ST-ZIP	ST. AUGUSTINE, FL 32086
TITLE	SD
NAME	RANCOURT, VIRGINIA
STREET ADDRESS	302 FERN HOLLOW RD
CITY-ST-ZIP	TALLAHASSEE, FL 32303
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: PAULINE RANCOURT *Pauline Rancourt P.* Date: **4-25-05** Daytime Phone #: **352-344-5519**