

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K19700

1. Entity Name
GERALDINE F. WHITE REALTY, INC.



FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90077 033 ***150.00

Principal Place of Business
4023 N. ARMENIA AVE
SUITE #100
TAMPA, FL 33607 US

Mailing Address
4023 N. ARMENIA AVE
SUITE #100
TAMPA, FL 33607 US

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country



03242004 Chg-P CR2E034 (10/03)

4. FEI Number
59-3134238

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
WHITE, GERALDINE F.
13608 #6105 SOUTH VILLAGE DR.
TAMPA, FL 33624

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

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 | | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | | |
|----------------------------|--------------------------|---------------------------------|--|---|--|-----------------------------------|-----------------------------------|
| TITLE | PD | <input type="checkbox"/> Delete | | TITLE PD | <input checked="" type="checkbox"/> Change | <input type="checkbox"/> Addition | |
| NAME | WHITE, GERALDINE F. | | | NAME | WHITE, GERALDINE F. | | |
| STREET ADDRESS | 13608 #6105 S VILLAGE DR | | | STREET ADDRESS | 2602 W. Arch Street | | |
| CITY-ST-ZIP | TAMPA, FL | | | CITY-ST-ZIP | Tampa, FL 33607-5226 | | |
| TITLE | VD | <input type="checkbox"/> Delete | | TITLE VD | <input checked="" type="checkbox"/> Change | <input type="checkbox"/> Addition | |
| NAME | WHITE, GERALDINE F. | | | NAME | WHITE, GERALDINE F. | | |
| STREET ADDRESS | 13608 #6105 S VILLAGE DR | | | STREET ADDRESS | 2602 W. Arch Street | | |
| CITY-ST-ZIP | TAMPA, FL | | | CITY-ST-ZIP | Tampa, FL 33607-5226 | | |
| TITLE | STD | <input type="checkbox"/> Delete | | TITLE STD | <input checked="" type="checkbox"/> Change | <input type="checkbox"/> Addition | |
| NAME | WHITE, ALTON M. | | | NAME | WHITE, ALTON M. | | |
| STREET ADDRESS | 13608 #6105 S VILLAGE DR | | | STREET ADDRESS | 2602 W. Arch Street | | |
| CITY-ST-ZIP | TAMPA, FL | | | CITY-ST-ZIP | Tampa, FL 33607-5226 | | |
| 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 |
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| 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 | | | |

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 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: *Geraldine F. White* March 25, 2004 (813) 873-8311
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Geraldine F. White