


2005 FOR PROFIT CORPORATION ANNUAL REPORT

102

DOCUMENT # K48245		
1. Entity Name DENSON REALTY, INC.		

FILED

05 SEP 16 PM 12:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 4205 S MACDILL AV - Suite C TAMPA, FL 33611 US	Mailing Address 4205 S MACDILL AV - Suite C TAMPA, FL 33611 US
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2. Principal Place of Business 4205 S MACDILL AV - Suite C Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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09022005 Chg-P CR2E034 (10/03)

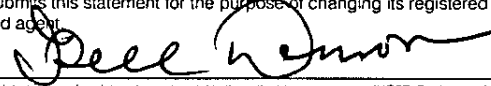
City & State Tampa, FL	City & State
Zip 33611	Country USA

4. FEI Number 59-2957978	Applied For Not Applicable
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5. Certificate of Status Desired Sole Proprietorship	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DENSON, ISELL 10109 BELLVILLE PL TAMPA, FL 33624	
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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 	DATE

FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DENSON, ISELL 10109 BELVILLE PL TAMPA, FL 33624 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	50005978720 Change <input type="checkbox"/> Addition 09/20/05--01054--005 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: 	9-12-05-913-787-5736 Date Daytime Phone #



DENSON REALTY, INC.®

St. Croix's Plaza
4205 S. MacDill Ave., Suite C
Tampa, FL 33611

2012

9-12-05

Dear Sir or mam:
Please help me! I did not Receive
notice regarding profit corporation. Maybe it
was the missing "Suite" that's missing address.
At any rate, please waive the Late fee.

May I thank you in advance?

Respectfully,

Josee Denson
President