

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K50339

FILED
Apr 20, 2004
Secretary of State

Entity Name: UNITED REALTY SERVICES, INC.

Current Principal Place of Business:

% RICHARD D. ALLISON
452 OSCEOLA ST., SUITE 101
ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address:

% RICHARD D. ALLISON
452 OSCEOLA ST., SUITE 101
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 59-2918185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

% RICHARD D. ALLISON
452 OSCEOLA ST., SUITE 215
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

% RICHARD D. ALLISON
452 OSCEOLA ST., SUITE 215
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of Current Registered Agent:

ALLISON, RICHARD D.
611 E. ORANGE STR.
ALTAMONTE SPRINGS, FL 32701

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: PTS () Delete
Name: ALLISON, RICHARD D.,
Address: 611 E. ORANGE ST.
City-St-Zip: ALTAMONTE SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RICHARD D. ALLISON

P, T,

04/20/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date