


2004 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 08:00 AM
Secretary of State

DOCUMENT # K52115 1. Entity Name HELSETH REALTY, INC.	
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Principal Place of Business C/O HAROLD S. HELSETH 7805 IMMOKOLEE RD FORT PIERCE, FL 34951	Mailing Address C/O HAROLD S. HELSETH 7805 IMMOKOLEE RD FORT PIERCE, FL 34951
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01102004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0101394	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent HELSETH, HAROLD S. 7805 IMMOKOLEE RD FORT PIERCE, FL 34951

**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: _____ (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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELSETH, HAROLD S. 7805 IMMOKOLEE RD FT. PIERCE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELSETH, BRIAN A. 17580 HAMMOCK LANE FT. PIERCE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELSETH, CRAIG S. 18602 MACH ONE DRIVE FT. PIERCE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/23/04-80040-009 150.00

**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: Harold S. Helseth HAROLD S. HELSETH 1/29/04 772-461-5805
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #