

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # L41789

1. Entity Name
FLORIDA TERRA FIRMA CORPORATION



Principal Place of Business: % RICHARD R. SIGNORE, 3055 GENOA LANE, JUPITER FL 33477
 Mailing Address: % RICHARD R. SIGNORE, 3055 GENOA LANE, JUPITER FL 33477



MOORE CR2E034 (11/03)

2. Principal Place of Business: Suite, Apt. #, etc; City & State; Zip; Country

3. Mailing Address: Suite, Apt. #, etc; City & State; Zip; Country

4. FEI Number: **65-0172493** Applied For: Not Applicable:

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

6. Name and Address of Current Registered Agent
SIGNORE, RICHARD R.
3055 GENOA LANE
JUPITER FL 33477

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS	
TITLE: D NAME: SIGNORE, RICHARD R. STREET ADDRESS: 3055 GENOA LANE CITY-ST-ZIP: JUPITER FL	<input type="checkbox"/> Delete
TITLE: D NAME: SIGNORE, JOYCE M. STREET ADDRESS: 3055 GENOA LANE CITY-ST-ZIP: JUPITER FL	<input type="checkbox"/> Delete
TITLE: D NAME: LOVRICH, LYNNE M STREET ADDRESS: 1080 NOTT RD. CITY-ST-ZIP: GUILDERLAND NY 12084	<input type="checkbox"/> Delete
TITLE: D NAME: SIGNORE, LESLIE A STREET ADDRESS: 26A PRINCE COURT CITY-ST-ZIP: LOUDONVILLE NY 12211	<input type="checkbox"/> Delete
TITLE: D NAME: SIGNORE, MICHAEL R STREET ADDRESS: 26B PRINCE COURT CITY-ST-ZIP: LOUDONVILLE NY 12211	<input type="checkbox"/> Delete
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
U00000027421 02/03/04-80046-002 150.00	
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"/> Change <input type="checkbox"/> Addition
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"/> 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)(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: Richard R. Signore, RICHARD R. SIGNORE 1/26/04 561-575-0529