

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L73072

FILED  
Jul 01, 2005  
Secretary of State

Entity Name: CAPITAL REALTY ADVISORS, INC.

## Current Principal Place of Business:

600 SANDTREE DRIVE  
SUITE 109  
PALM BEACH GARDENS, FL 33403 US

## New Principal Place of Business:

## Current Mailing Address:

600 SANDTREE DRIVE  
SUITE 109  
PALM BEACH GARDENS, FL 33403 US

## New Mailing Address:

FEI Number: 65-0192168

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCDONALD, DONNA  
600 SANDTREE DRIVE  
SUITE 109  
PALM BEACH GARDENS, FL 33403 US

## 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WILLIAMS, RALPH V.  
Address: 600 SANDTREE DRIVE, SUITE 109  
City-St-Zip: PALM BEACH GARDENS, FL 33403

Title: PSD ( ) Delete  
Name: MCDONALD, DONNA M.  
Address: 600 SANDTREE DRIVE, SUITE 109  
City-St-Zip: PALM BEACH GARDENS, FL 33403

Title: D ( ) Delete  
Name: FIMBERG, STANLEY R.  
Address: 600 SANDTREE DRIVE, SUITE 109  
City-St-Zip: PALM BEACH GARDENS, FL 33403

Title: VPT ( ) Delete  
Name: MOORE, LISA G.  
Address: 600 SANDTREE DRIVE, SUITE 109  
City-St-Zip: PALM BEACH GARDENS, FL 33403

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DONNA MCDONALD

PRES

07/01/2005

Electronic Signature of Signing Officer or Director

Date