2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L86589

1. Entity Name

PRESERVES AT PALM-AIRE DEVELOPMENT CORPORATION

Principal Place of Business

1133 FOURTH STREET

STE 300

SARASOTA, FL 34236

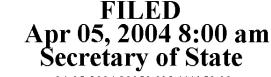


Mailing Address

1133 FOURTH STREET

STE 300

SARASOTA, FL 34236



04-05-2004 90050 013 ***150.00

BEESHUPE



03152004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0210712 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MESSICK, ROBERT E. 2033 MAIN STREET SUITE 600 SARASOTA, FL 34237

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing

	After Ma	ay 1, 2004 Fee will be \$550.00	Trust Fund Contribution.		Added to Fees	
	10.	OFFICERS AND DIREC	TORS _	H.F. L. P.	The Figure 1 to 1	<u> </u>
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUSTARI, RONALD 290 COCOANUT AVE.,#3 SARASOTA, FL				
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUSTARI, JOANNE 290 COCOANUT AVE.,#3 SARASOTA, FL				
_	TITLE	V	<u> </u>			
	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SANCHEZ, ALBERT A 1133 FOURTH ST. #300 SARASOTA, FL 34236 V BLUMBERG, JERRY 1133 4TH ST SARASOTA, FL			DO IN	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP					
	TITLE NAME 'STREET ADDRESS CITY-ST-ZIP					

OT WRITE HIS SPACE

12. I hereby certify that the information supplied with his 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 frue 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 employered 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 addiess with all other like empowered.

SIGNATURE:

INTED NAME OF SIGNING OFFICER OR DIRECTOR

1 366-1001