## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # M71329**

t. Entity Name SUPERIOR PROPERTIES, INC.



FILED
Jan 15, 2004 08:00 AM
Secretary of State

Principal Place of Business C/O GEORGE BUTLER, III 6520 ANGUS DRIVE LAKELAND, FL 33809 Mailing Address C/O GEORGE BUTLER, III 6520 ANGUS DRIVE LAKELAND, FL 33809



## DO NOT WRITE IN THIS SPACE

01112004 No Chg-P		CR2E034 (10/03)		
4. FEI Number			Applied For	
59-2873	323		Not Applicable	
5. Certificate of Status Desired		Ø	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
BUTLER, GEORGE, III
6520 ANGUS DRIVE

LAKELAND, FL 33809

## 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_	Signature, typed or printed name of registered agent and title	It applicable (NOTE Registers	d Agent signature	required when reinstating)	DATE		
B. Floating Compaign Fine				\$5.00 May Be			
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Trust Fund Contribution.		Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTLER, GEORGE, III 6520 ANGUS DRIVE LAKELAND, FL						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					000000005791 01/16/04-80005-015 158.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·						
12. I hereby	certify that the information supplied with this f	iling does not qualify for the exe and accurate and that my signs	emption state sture shall ha	d in Section 119.07(3) ve the same legal effe	(f) Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director		

12. Thereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07.63(g), Florida Statutes, I take the 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: 🚣

COME BULLET GEORGE BUT LER, FRESHENT BATURE AND TYPED OR PRINTED NAME OF BIORING OFFICER OR DIRECTOR

1/11/04

263-858-9243

Daytime Phone #