2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M86231

1. Entity Name
TOPMILLER REALTY, INC.

FILED
Apr 07, 2004 08:00 AM
Secretary of State

Principal Place of Business

% GERALD R. TOPMILLER 4367 NORTH FEDERAL HIGHWAY #103 FT. LAUDERDALE, FL 33308 Mailing Address

% Gerald R. Topmiller 4367 North Federal Highway #103 Ft. Lauderdale, Fl. 33308



DO NOT WRITE IN THIS SPACE

03252004 No Chg-P CR2E034 (10/03)

Applied For Not Applicable

65-0065844

5. Certificate of Status Desired

4. FEI Number

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

TOPMILLER, GERALD R. 4367 NORTH FEDERAL HWY #103

FT. LAUDERDALE, FL 33308

SIGNATURE:

DO NOT WRITE IN THIS SPACE

 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 primed name of registered agent and title if applicable. (NOTE, Registered Agent eignature required when reinstating) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financia Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000105498 04/07/04-80028-008 150.00
18. OFFICERS AND DIRECTORS					
TITLE NAME STRIET ADDRESS CITY-ST-ZIP	D TOPMILLER, GERALD R. 4367 N. FEDERAL HWY #103 FT. LAUDERDALE, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZP				IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not quality 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.					