2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004
Secretary of State

DOCUMENT# N03000000852

Entity Name: CAMINOS REALES, INC.

Current Principal Place of Business:

142 S. OLD KINGS RD.
ORMOND BCH, FL 32174

New Principal Place of Business:

Current Mailing Address:

142 S. OLD KINGS RD.
ORMOND BCH, FL 32174

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STUMP, GEORGE
142 S. OLD KINGS RD.
ORMOND BCH, FL 32174

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

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: STUMP, GEORGE
Address: 142 S. OLD KINGS RD.
City-St-Zip: ORMOND BCH, FL 32174

Title: VCD ( ) Delete
Name: STUMP, CLARA
Address: 142 S. OLD KINGS RD.
City-St-Zip: ORMOND BCH, FL 32174

Title: D ( ) Delete
Name: STUMP, CAROL A
Address: 154 S. OLD KINGS RD.
City-St-Zip: ORMOND BCH, FL 32174

Title: D ( ) Delete
Name: STUMP, DAPHNE A
Address: 154 S. OLD KINGS RD.
City-St-Zip: ORMOND BCH, FL 32174

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE STUMP CD 03/19/2004
Electronic Signature of Signing Officer or Director — Date