

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000026922

Entity Name: FCR PROPERTIES, INC.

FILED  
Jan 24, 2004  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 7375  
FORT MYERS, FL 33911 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 7375  
FORT MYERS, FL 33911 US

## New Mailing Address:

FEI Number: 65-0014895

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARGANO, ANTHONY J  
2075 WEST FIRST STREET  
SUITE 203  
FORT MYERS, FL 33901 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PAPARELLA, GUY S  
Address: 16930 TIMBERLAKES DRIVE  
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete  
Name: NARDI, VINNIE  
Address: 16930 TIMBERLAKES DRIVE  
City-St-Zip: FORT MYERS, FL 33908

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GUY S. PAPARELLA

PRES

01/24/2004

Electronic Signature of Signing Officer or Director

Date