

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000092285

1. Entity Name
HOWARD REALTY GROUP, INC.



Principal Place of Business
1660 WATERS EDGE DRIVE
ORANGE PARK, FL 32003

Mailing Address
1660 WATERS EDGE DRIVE
ORANGE PARK, FL 32003



03262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3614227

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

HOWARD, JAN R
1660 WATERS EDGE DRIVE
ORANGE PARK, FL 32002

**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 *Jan R. Howard*
Signature, typed or printed name of registered agent and title if applicable

April 7, 2004
DATE

(NOTE: Registered Agent's signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution

10. OFFICERS AND DIRECTORS

TITLE P
NAME HOWARD, ROBERT
STREET ADDRESS 1600 WATERS EDGE DR
CITY - ST - ZIP ORANGE PARK, FL 32003

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119 07(3)(i) 119-07(3)(i)
04/12/04-81779-123 150.00

12. I hereby certify that the information supplied with this 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 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: *Robert M. Howard* **ROBERT M. HOWARD**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/04 **904-264-1425**
Date Daytime Phone #