## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## DOCUMENT # P00000095136

1. Entity Name

FLORIDA GENERAL PROPERTIES, INC.



FILED Feb 10, 2005 08:00 AM Secretary of State

Principal Place of Business

1547 FLORIDA MANGO ROAD

UNIT 11-2

WEST PALM BEACH, FL 33409

Mailing Address

BOX 15454

WEST PALM BEACH, FL 33416

02082005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1045101 Applied For Not Applicable

5. Certificate of Status DesIred

X

\$8.75 Additional Fee Required

581 358-0562 Dayline Phone #

6. Name and Address of Current Registered Agent

COATES, MATTHEW J 1547 FLORIDA MANGO RD NO BUILD 11-2 WEST PALM BEACH, FL 33409

## DO NOT WRITE IN THIS SPACE

WEST PALM BEACH, FL 33409			IN THIS SPACE		
	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered			Agent signature	required when reinstating)	DATÉ
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campalgn Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICĒRS AND DIREC	TORS		·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD COATES, MATTHEW J 1547 FLORIDA MANGO ROAD - UNIT WEST PALM BEACH, FL 33409	11-2	U00000223990 02/10/05-80064-023 158.75		
TITLE Name Street address City-St-Zip					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE Name Street address City-St-Zip					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE Name Street address City-St-Zip					
12. I hereby of indicated of the corchanged,	pertify that the information supplied with this fil on this report or supplemental report is true a poration or the receiver or trustee empowere or on an attachment with an address, with all	ing does not qualify for the exer not accurate and that my signat f to execute this report as requir other like empowered.	nption state ure shall haved ed by Chap	d in Section 119.07(3) ve the same legal effecter 607, Florida Statute	(i), Florida Statutes. I further certify that the information of as if made under oath, that I am an officer or directores; and that my name appears in Block 10 or Block 11 if