2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000036635

Entity Name: ISLAND CITY REALTY INC

409 MISTY GROVE CIRCLE

MORRISVILLE, NC 27560

Address:

City-St-Zip:

FILED Feb 03, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2367WILTON DRIVE WILTON MANORS, FL 333051283 US **Current Mailing Address: New Mailing Address:** 25339A NW WALTER POTTS RD ALTHA, FL 32421 US FEI Number: 65-0526704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARGYROS, PATRICIA L 25339A NW WALTER POTTS RD LOT K ALTHA, FL 32421 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ARGYROS, PATRICIA L Name: Name: 25339A NW WALTER POTTS RD Address: Address: City-St-Zip: ALTHA, FL 32421 US City-St-Zip: Title: Title: () Change () Addition () Delete Name: YOUNG, JOHANNA C 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: PATRICIA ARGYROS PRES 02/03/2004