


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005 8:00 am
Secretary of State

03-16-2005 90044 037 ***150.00

DOCUMENT # P01000056918	
1. Entity Name UNITED COMMUNITY REALTY CORP.	

Principal Place of Business 3300 UNIVERSITY DR., STE. #405 CORAL SPRINGS, FL 33065	Mailing Address 3300 UNIVERSITY DR., STE. #405 CORAL SPRINGS, FL 33065
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20021364

2. Principal Place of Business 11784 W SAMPLE ROAD Suite, Apt. #, etc.	3. Mailing Address 11784 W SAMPLE ROAD Suite, Apt. #, etc.
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03092005 Chg-P CR2E034 (10/03)

City & State CORAL SPRINGS FL	City & State CORAL SPRINGS FL
Zip 33065	Zip 33065
Country USA	Country USA

4. FEI Number 65-1113481	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MOSBERG, ANDREW 3300 UNIVERSITY DR., STE. #405 CORAL SPRINGS, FL 33065	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 11784 W SAMPLE ROAD City CORAL SPRINGS FL Zip Code 33065	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE C	<input type="checkbox"/> Delete	TITLE Change <input type="checkbox"/> Addition	
NAME MOSBERG, ANDREW		NAME 11784 W. SAMPLE ROAD	
STREET ADDRESS 3300 UNIVERSITY DR., STE. #405		STREET ADDRESS CORAL SPRINGS, FL 33065	
CITY-ST-ZIP CORAL SPRINGS, FL 33065		CITY-ST-ZIP CORAL SPRINGS, FL 33065	
TITLE P	<input type="checkbox"/> Delete	TITLE Change <input type="checkbox"/> Addition	
NAME SOLOMON, HOWARD		NAME 11784 W. SAMPLE ROAD	
STREET ADDRESS 3300 UNIVERSITY DR., STE. #405		STREET ADDRESS CORAL SPRINGS, FL 33065	
CITY-ST-ZIP CORAL SPRINGS, FL 33065		CITY-ST-ZIP CORAL SPRINGS, FL 33065	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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:  **ANDREW MOSBERG** CHAIRMAN OF THE BOARD
Date: **3/8/05** Daytime Phone: **954-352-8119**