

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000078814

FILED  
Jan 16, 2004  
Secretary of State

Entity Name: PLACIDA AREA REALTY, INC.

**Current Principal Place of Business:**

281 ANNAPOLIS LANE  
ROTONDA WEST, FL

**New Principal Place of Business:**

281 ANNAPOLIS LANE  
ROTONDA WEST, FL 33947 US

**Current Mailing Address:**

281 ANNAPOLIS LANE  
SUITE 210  
ROTONDA WEST, FL 34224

**New Mailing Address:**

281 ANNAPOLIS LANE  
ROTONDA WEST, FL 33947- US

FEI Number: 63-1130199

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BULWAN, BERNITA  
281 ANNAPOLIS LANE  
ENGLEWOOD, FL 342233290 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: BULWAN, BERNITA A  
Address: 281 ANNAPOLIS LN.  
City-St-Zip: ROTONDA WEST, FL 33947

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BULWAN, BERNITA A  
Address: 281 ANNAPOLIS LN.  
City-St-Zip: ROTONDA WEST, FL 33947

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: BERNITA A. BULWAN

PD

01/16/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date