


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000104150 1. Entity Name FSBO REALTY, INC.	
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Principal Place of Business 6147 SW 152 STREET VILLAGE OF PALMETTO BAY, FL 33157-2644	Mailing Address 6147 SW 152ND ST. VILLAGE OF PALMETTO BAY, FL 33157-2644
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DO NOT WRITE IN THIS SPACE

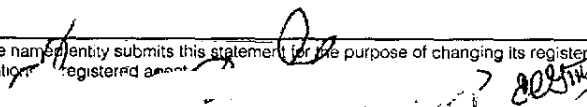


01182005	No Chg-P	CR2E034 (10/03)
4. FEI Number 47-0854082	Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired	<input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GILLETTE, EDWARD C III 6147 SW 152ND ST. VILLAGE OF PALMETTO BAY, FL 33157-2644
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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 a registered agent.

SIGNATURE:  DATE: _____

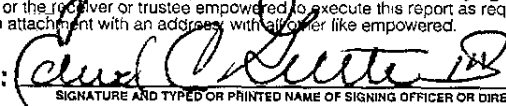
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GILLETTE, EDWARD C III 6147 SW 152ND ST. VILLAGE OF PALMETTO BAY, FL 331572644
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES GILLETTE, MARTA E 6147 SW 152ND ST. VILLAGE OF PALMETTO BAY, FL 331572644
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 affower like empowered.

SIGNATURE:  DATE: 01/21/05 305 238 7105

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR