

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2004 8:00 am
Secretary of State

04-09-2004 90051 037 ***150.00

DOCUMENT # P01000104669

1. Entity Name

RELIABLE PROPERTY MANAGERS INC



Principal Place of Business

14609 KRISTINRIGHT LANE
ORLANDO FL 32826
US

Mailing Address

14609 KRISTINRIGHT LANE
ORLANDO FL 32826
US

24003404



MOORE CR2E034 (11/03)

2. Principal Place of Business

14609 Kristennright Ln

3. Mailing Address PMB 345

4250 Ala Laga Trail

Suite, Apt. #, etc.

Suite, Apt. #, etc.

212

City & State

Orlando Florida

City & State

Oviedo Florida

4. FEI Number

04-3604707

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BURNSIDE, LILLY L
14609 KRISTENRIGHT LANE
ORLANDO FL 32826

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Lilly L. Burnside

1-27-04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PST
NAME BURNSIDE, LILLY L
STREET ADDRESS 6243 BENTPINE DRIVE 820-A
CITY-ST-ZIP ORLANDO FL 32822 ☐ Delete

TITLE V
NAME BURNSIDE, CURTIS S
STREET ADDRESS 6243 BENT PINE DRIVE 820-A
CITY-ST-ZIP ORLANDO FL 32822 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST
NAME Burnside, Lilly L.
STREET ADDRESS 14609 Kristennright Ln
CITY-ST-ZIP Orlando, FL 32826 ☒ Change ☐ Addition

TITLE V
NAME Burnside, Curtis S.
STREET ADDRESS 14609 Kristennright Ln
CITY-ST-ZIP Orlando, FL 32826 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Lilly L. Burnside

1-27-04

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR