

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000023376

1. Entity Name

POLARIS REALTY GROUP, INC.



Principal Place of Business

572 2ND AVE., SOUTH
SAINT PETERSBURG, FL 33701

Mailing Address

245 14TH AVE. NE
ST. PETERSBURG, FL 33701



01222004 No Chg-P CR2E034 (10/03)

4. FEI Number

01-0631754

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HERMAN, MITCHELL
245 14TH AVE. NE
ST. PETERSBURG, FL 33701

**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 registered agent.

SIGNATURE

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

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	DANN, DONNA M
STREET ADDRESS	4423 BLARNEY LN
CITY-ST-ZIP	BROOKSVILLE, FL 34601
TITLE	P
NAME	HERMAN, MITCHELL
STREET ADDRESS	572 2ND AVE., SOUTH
CITY-ST-ZIP	SAINT PETERSBURG, FL 33701
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000013390
01/26/04-80051-022 150.00

**DO NOT WRITE
IN THIS SPACE**

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 officers empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director

01-22-04

Date

(727) 550-0971

Daytime Phone #