2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2004 8:00 am Secretary of State

DOCUMENT # P02000032670 1. Entity Name AUBURNDALE ESTATES, INC.				04-23-2004 90234 014 ***158.75	
Principal Place of Business Mailing Address			<u> </u>	7400167	
220 LOOKOUT PL #150 220 LOOKOUT PL #150 MAITLAND, FL 32751 MAITLAND, FL 32751				`Y	
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2. Principal Place of Business 5840 Red Bug Lake Road 5840 Red Bug Lake			Lake Road		
Suite, Apt. #, etc. Suite, Apt. #, etc. #345				04132004 Chg-P CR2E034 (10/03)	
City & State City & State				4. FEI Number Applied For	
Winter Springs, F1. Winter Springs, Zip Country Zip Cour		S, FI.	02-0574682 Not Applicable 5. Certificate of Status Desired \$8.75 Additional		
32708	USA	32708	USÁ	Fee Required	
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent	
QUAID, RICHARD 220 LOOKOUT PL #150			Ric Street Addres 584	Richard A. Quaid Street Address (P.O. Box Number is Not Acceptable) 5840 Red Bug Lake Road	
MAITLAND, FL 32751			#34		
			City	₽ Zin Code	
8. The above named entity submits this state of Florida. I am familiar with, and accept					
the obligations of registered agent. SIGNATURE SIGNATURE Signature. Typed or prints/frame of believered caths and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE					
(NOTE: Registered Agent signature, typed or printerframe of consistenced Agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing S5.00 May Be Trust Fund Contribution. Added to Fees					
10.	OFFICERS AND I		11."	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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CITY-ST-ZIP	MAITLAND, FL 32751		CITY-ST-ZIP		
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~12.—I hereby certify that the information supplied with this filling 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 trusted 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.					