


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 16, 2004 8:00 am**  
**Secretary of State**

02-16-2004 90061 027 \*\*\*150.00

DOCUMENT # P02000061771			
1. Entity Name UNCOMMON REALTY, INC.			
Principal Place of Business 1342 COLONIAL BLVD. P.O. BOX 1662 FORT MYERS, FL 33902 US		Mailing Address 1342 COLONIAL BLVD. P.O. BOX 1662 FORT MYERS, FL 33902 US	
2. Principal Place of Business 9101 West College Pointe Dr Suite, Apt. #, etc. Suite 1 City & State Ft MYERS FL Zip 33919 Country USA		3. Mailing Address PO Box 1662 Suite, Apt. #, etc. City & State Ft MYERS FL Zip 33902 Country USA	
6. Name and Address of Current Registered Agent KERMER DOUGLAS, EDITH M MRS. 1342 COLONIAL BLVD. FORT MYERS, FL 33902		7. Name and Address of New Registered Agent Name <u>Samie</u> Street Address (P.O. Box Number is Not Acceptable) 9101 W. COLLEGE POINTE DR STE 1 City <u>FORT MYERS</u> FL Zip Code <u>33919</u>	
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 <u>[Signature]</u> (NOTE: Registered Agent signature required when reinstating) DATE <u>2/12/04</u>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KERMER DOUGLAS, EDITH M 1342 COLONIAL BLVD., P.O. BOX 1662 FORT MYERS, FL 33902 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/T 1002 CLARELLAN DR FT MYERS, FL 33919 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KINSEY, JAMES E JR 1342 COLONIAL BLVD., P.O. BOX 1662 FORT MYERS, FL 33902 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/S KINSEY, LESLIE 9101 W COLLEGE POINTE DR. SUB 1 FT MYERS, FL 33919 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 12/2004 239-939-  
2733