2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000068239

Address:

City-St-Zip:

6325 BALBOA LANE

APOLLO BEACH, FL 33572

FILED Jan 15, 2004 Secretary of State

					,	
Entity Na	me: DOLPHIN	REALTY, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
	•			.,,		
202 APOL APOLLO E	LO BCH BLVD. 3CH, FL 33572					
Current Mailing Address:			New Mailing Address:			
	LO BCH BLVD. 3CH, FL 33572					
FEI Number	: 75-3068406	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:			
	AGEN LO BCH BLVD. BCH, FL 33572					
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing i	ts registered off	ice or registered agent, or both,	
SIGNATU	⊋F.					
0,0,1,,,,		ic Signature of Registered Ag	ent		 Date	
Flection Car		Trust Fund Contribution ().				
2.000.011 00.	pargir i marioning	Tract rana Continuation ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:	PD ()	Delete	Title:	() (Change () Addition	
Name:	BARRON, CHAF		Name:	` '	3 ()	
Address:	PO BOX 155		Address:			
City-St-Zip:	SHIRLEY, AR 7	2153	City-St-Zip:			
Title:	VD ()	Delete	Title:	()(Change () Addition	
Name:	KLAHR, HAGEN		Name:	. ,	• , ,	
Address:	6325 BLABOA L		Address:			
City-St-Zip:	APOLLO BEACH		City-St-Zip:			
Title:	DM ()	Delete	Title:	() (Change () Addition	
Name:	CUNNEEN, EDV		Name:	() -	3 ()	
Address:	6319 COCOA L		Address:			
City-St-Zip:	APOLLO BEACH		City-St-Zip:			
Title:	ST ()	Delete	Title:	ST (X) (Change () Addition	
Name [.]	BURNESS JEA		Name:	BURRESS JEAN		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

6325 BALBOA LANE

APOLLO BEACH, FL 33572

SIGNATURE: JEANNE BURRRESS ST 01/15/2004