

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000101925

FILED  
Jul 13, 2004  
Secretary of State

Entity Name: LYNDON E. CLIFTON, P.A.

## Current Principal Place of Business:

RE/MAX COASTAL PROPERTIES  
21 HWY 98 E ( HARBORWALK)  
DESTIN, FL 32541

## New Principal Place of Business:

RE/MAX COASTAL PROPERTIES  
125 MAIN ST  
DESTIN, FL 32541

## Current Mailing Address:

RE/MAX COASTAL PROPERTIES  
21 HWY 98 E ( HARBORWALK)  
DESTIN, FL 32541

## New Mailing Address:

RE/MAX COASTAL PROPERTIES  
125 MAIN ST  
DESTIN, FL 32541

FEI Number: 81-0573055

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLIFTON, LYNDON E  
111 VIRGINIA DR  
FT WALTON BEACH, FL 32548 US

## Name and Address of New Registered Agent:

CLIFTON, LYNDON E  
151 COUNTRY CLUB DR W  
DESTIN, FL 32541 US

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.

SIGNATURE: LYNDON E. CLIFTON

07/13/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete  
Name: CLIFTON, LYNDON E  
Address: 21 HWY 98 E (HARBORWALK)  
City-St-Zip: DESTIN, FL 32541

Title: VST ( ) Delete  
Name: CLIFTON, ALISSA L  
Address: 21 HWY 98 E (HARBORWALK)  
City-St-Zip: DESTIN, FL 32541

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change ( ) Addition  
Name: CLIFTON, LYNDON E  
Address: 125 MAIN ST  
City-St-Zip: DESTIN, FL 32541

Title: VST (X) Change ( ) Addition  
Name: CLIFTON, ALISSA L  
Address: 125 MAIN ST  
City-St-Zip: DESTIN, FL 32541

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.

SIGNATURE: ALISSA L CLIFTON

VST

07/13/2004

Electronic Signature of Signing Officer or Director

Date