**2004 FOR PROFIT CORPORATION** 

## **ANNUAL REPORT (AR)** DOCUMENT # P02000106489



## **FILED** Mar 29, 2004 8:00 am Secretary of State

1. Entity Name						<u> </u>				
FIRST FIDELITY REALTY GROUP INC.						7	03-29-2004	90407 03	8 ***150.0	O
Principal Plac	e of Business		Mailing Address							
853 VANDERBUILT RD STE 231			853 VANDERBUILT RD STE 231							
NAPLES FL 34108			NAPLES FL 34108					-	4-1-21-31	
									TE BUST BIEDI TETLE TË	
2 Principal E	Place of Business		3. Mailing Address		<del></del>					
2. Principal Place of Business			3. Maining Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			$\dashv$	MOORE	CDSENS	4 (11/02)	
·		•					MOORE CR2E034 (11/03)			
City & State			City & State			4. FEI Number			Ap	plied For
							16-1635-122			t Applicable
Zip	Country	'	Zip	Coun	try	<b>5.</b> Ce	ertificate of Status Desire	d 🔲	\$8.75 Add	
6 Name and Address of Curre		and of Current Ro	Positioned Agent		Fee Required					
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name					
THOMAS, FRANK										
853 VANDERBUILT RD STE 231 NAPLES FL 34108					Street Address (P.O. Box Number is Not Acceptable)					
			City							
					City			F	L Zip Cod	e
8. The above	named entity submits t	his statement for th	ne purpose of changing i	ts register	ed office or regis	tered age	nt, or both, in the State of	Florida. I ar	n familiar with,	and accept
the obligation	tions of registered agen	t.								
SIGNATURE										
SIGNATORIE	Signature, typed or printed nam	ne of registered agent and	title if applicable. (NC	DTE. Registere	d Agent signature requ	red when rein	stating)	DATE		
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  Make Check Payable to Florida Department of State							9. Election Campaign Trust Fund Contrib	_		O May Be to Fees
10.		OFFICERS AND DI		11.		ADC	DITIONS/CHANGES TO C	DEFICERS AN	ID DIRECTOR	S IN 11
TITLE	P		☐ Delete	זוזט					☐ Change	Addition
NAME	THOMAS, FRANK		2 50,000	NAM						
STREET ADDRESS			STRE	ET ADDRESS						
CITY-ST-ZIP	NAPLES FL 34108			CITY	- ST - ZIP					!
TITLE			☐ Delete	TITL	E				☐ Change	Addition
NAME	ļ			NAM						
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP					-ST-ZIP					
TITLE			Defete	TITL					Change	☐ Addition
NAME STREET ADDRESS				MAM	ET ADDRESS		-			-
CITY-ST-ZIP				5111						
·				CITY	-ST-ZIP					
TIT) F			☐ Nalota		-ST-ZIP				Chagge	noitibhA 🗌
TITLE NAME			☐ Delete	CITY TITU NAM	'-ST-ZIP E				☐ Change	Addition
			☐ Delete	TITL	'-ST-ZIP E				☐ Change	Addition
NAME			☐ Delete	TITU NAM STRE	'-ST-ZIP E IE				Change	Addition
NAME STREET ADDRESS			☐ Delete	TITU NAM STRE	E EET ADDRESS				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				TITLI NAM STRI CITY TITLI NAM	-ST-ZIP  E  EEE ADDRESS -ST-ZIP  E					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				TITLI NAM STRI CITY TITLI NAM STRI	-ST-ZIP  E  EEET ADDRESS  -ST-ZIP  E  EEET ADDRESS					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			□ Delete	TITLI NAM STRI CITY TITLI NAM STRI	-ST-ZIP  E  EEE ADDRESS -ST-ZIP  E				Change	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				TITLE NAM STRI CITY TITLE NAM STRI CITY TITLE TITLE	E SET ADDRESS F-ST-ZIP  E SET ADDRESS F-ST-ZIP  E SET ADDRESS F-ST-ZIP  E SET ADDRESS F-ST-ZIP  E SET ADDRESS F-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	TITLI NAM STRI CITY TITL NAM STRI CITY TITL NAM NAM	E SET ADDRESS F-ST-ZIP  E SET ADDRESS F-ST-ZIP  E SET ADDRESS F-ST-ZIP  E SET ADDRESS F-ST-ZIP  E SET ADDRESS F-ST-ZIP				Change	☐ Addition

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 action, with all one like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR