
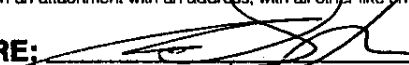


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-23-2004 90234 022 \*\*\*150.00

<b>DOCUMENT # P02000106639</b> 1. Entity Name <b>MORGAN REALTY OF WEST VOLUSIA, CORP.</b>					
Principal Place of Business <b>2290 S. VOLUSIA AVE. SUITE 44 ORANGE CITY, FL 32763</b>			Mailing Address <b>2290 S. VOLUSIA AVE. SUITE 44 ORANGE CITY, FL 32763</b>		
2. Principal Place of Business <b>2290 S. VOLUSIA AVE</b>		3. Mailing Address <b>2290 S. VOLUSIA AVE.</b>			
Suite, Apt. #, etc. <b>SUITE D</b>		Suite, Apt. #, etc. <b>SUITE D</b>			
City & State <b>ORANGE CITY, FL</b>		City & State <b>ORANGE CITY, FL</b>		4. FEI Number <b>22-3877023</b>	
Zip <b>32763</b>		Country <b>VOLUSIA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>MUNOZ, ARLENE S 836 TRAFALGAR ST DELTONA, FL 32725</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSVT MUNOZ, ARLENE S 2290 S. VOLUSIA AVE. ORANGE CITY, FL 32763		<div style="text-align: right;"><input type="checkbox"/> Delete</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>		
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 address, with all other like empowered.					
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <b>SIGNATURE:</b>  </div> <div style="width: 30%;"> <b>Arleene S. Munoz</b> </div> <div style="width: 20%;"> <b>4/6/04</b> </div> <div style="width: 10%;"> <b>386-7746169</b> </div> </div> <div style="display: flex; justify-content: space-between; font-size: small;"> <span>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</span> <span>Date</span> <span>Daytime Phone #</span> </div>					