

**5 FOR PROFIT CORPORATION**  
**ANNUAL REPORT**

ENT # P02000124465  
 TRAILS WEST REALTY, INC.



Principal Office of Business  
 7142 PISCINA STREET  
 ZEPHYRHILLS, FL 33541

Mailing Address  
 7142 PISCINA STREET  
 ZEPHYRHILLS, FL 33541



03032005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 56-2338053	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

ARDON, SCOTT E  
 90 S PINEAPPLE AVE  
 SARASOTA, FL 34238

**DO NOT WRITE IN THIS SPACE**

I, the above named entity, submit 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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEDRONSKY, JOSEPH 7142 PISCINA STREET ZEPHYRHILLS, FL 33541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FOURNIER, RONALD 7142 PISCINA STREET ZEPHYRHILLS, FL 33541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TRUSLEY, JIM 7142 PISCINA STREET ZEPHYRHILLS, FL 33541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MUNGER, DEAN 7142 PISCINA STREET ZEPHYRHILLS, FL 33541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HICKS, JOHN 7142 PISCINA STREET ZEPHYRHILLS, FL 33541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS GORMAN, WILLIAM 280 LA VISTA DR. W WINTER SPRINGS, FL 32708

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 03/07/05-80061-017 158.75

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(D), 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.

SIGNATURE: Dean Munger Dean Munger, Treasurer 3-4-05  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone (813) 780-7559