

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 27, 2004 8:00 am**  
**Secretary of State**

09-27-2004 90002 043 \*\*\*150.00

**DOCUMENT # P03000088201**

1. Entity Name  
**T WRIGHT PROPERTIES, INC.**



Principal Place of Business  
**1225 PALM BEACH LAKES BOULEVARD  
WEST PALM BEACH, FL 33401**

Mailing Address  
**1225 PALM BEACH LAKES BOULEVARD  
WEST PALM BEACH, FL 33401**

14027407



2. Principal Place of Business

3. Mailing Address

**2701 NW Boca Raton Blvd**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**# 211**

09172004

Chg-P

CR2E034 (10/03)

City & State

City & State

**Boca Raton, FL**

4. FEI Number

**01-0795566**

Applied For

Not Applicable

Zip

Country

Zip

Country

**33431**

**USA**

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATE ACCESS, INC.  
236 EAST 6TH AVENUE  
TALLAHASSEE, FL 32303**

Name

**Tom Wright, Jr.**

Street Address (P.O. Box Number is Not Acceptable)

**2701 NW Boca Raton Blvd**

**Suite 211**

City

**Boca Raton**

FL

Zip Code

**33431**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**9-18-04**

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME WRIGHT, THOMAS ☐ Delete  
STREET ADDRESS 1225 PALM BEACH LAKES BOULEVARD  
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE VD  
NAME RODBERG, MARK O ☒ Delete  
STREET ADDRESS 1225 PALM BEACH LAKES BOULEVARD  
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition  
NAME WRIGHT, Tommie  
STREET ADDRESS 2701 NW Boca Raton Blvd #211  
CITY-ST-ZIP Boca Raton, FL 33431

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE: **Tommie Wright** **Tommie Wright Pres.** **9-18-04** **561.347.2376**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #