

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90233 034 ***150.00

DOCUMENT # P03000098187

1. Entity Name

SIGNATURE REAL ESTATE SERVICES OF OSCEOLA, INC



Principal Place of Business

**1601 SHADY OAK DRIVE
KISSIMMEE FL 34744
US**

Mailing Address

**1601 SHADY OAK DRIVE
KISSIMMEE FL 34744
US**

2. Principal Place of Business

2411 THE OAKS BLVD

Suite, Apt. #, etc.

3. Mailing Address

2411 THE OAKS BLVD

Suite, Apt. #, etc.

City & State

Kissimmee FL

City & State

Kissimmee, FL

Zip

34746

Country

USA

Zip

34746

Country

USA

4. FEI Number

54-2125987

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**POLLOCK, SCOTT H
1601 SHADY OAK DRIVE
KISSIMMEE FL 34744**

7. Name and Address of New Registered Agent

Name

SCOTT POLLOCK

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

2411 THE OAKS BLVD

City

Kissimmee

FL

Zip Code

34746

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

Scott Pollock

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-23-04

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 Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME POLLOCK, SCOTT H
STREET ADDRESS 1601 SHADY OAK DRIVE
CITY-ST-ZIP KISSIMMEE FL 34744

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 2411 THE OAKS BLVD
CITY-ST-ZIP Kissimmee, FL 34746

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

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

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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:

Scott Pollock

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-04

Date

(407) 933-0726

Daytime Phone #