

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2004 8:00 am
Secretary of State

04-26-2004 90507 028 ***150.00

DOCUMENT # P03000106264

1. Entity Name
**DEEP REEF REAL ESTATE INVESTMENTS AND
ADMINISTRATIVE SERVICES, INC.**



Principal Place of Business
**2001 SE 17TH PLACE
CAPE CORAL, FL 33990 US**

Mailing Address
**2001 SE 17TH PLACE
CAPE CORAL, FL 33990 US**

66421770



2. Principal Place of Business
**2260 First St
Suite, Apt. #, etc. 212**

3. Mailing Address
**2260 First St
Suite, Apt. #, etc. 212**

01192004 Chg-P CR2E034 (10/03)

City & State
Fort Myers, FL

City & State
Fort Myers, FL

4. FEI Number
20-0260360

Zip
33901

Country
USA

Zip
33901

Country
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

**DAIGLE, TANYA M
2001 SE 17TH PLACE
CAPE CORAL, FL 33990**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 **Tanya M. Daigle President** **4/19/04**
Signature of registered agent or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	DAIGLE, TANYA M	
STREET ADDRESS	2001 SE 17TH PLACE	
CITY-ST-ZIP	CAPE CORAL, FL 33990	
TITLE	S	<input type="checkbox"/> Delete
NAME	DAIGLE, TANYA M	
STREET ADDRESS	2001 SE 17TH PLACE	
CITY-ST-ZIP	CAPE CORAL, FL 33990	
TITLE	T	<input type="checkbox"/> Delete
NAME	DAIGLE, JOSEPH V	
STREET ADDRESS	2001 SE 17TH PLACE	
CITY-ST-ZIP	CAPE CORAL, FL 33990	
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
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CITY-ST-ZIP		

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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: **Tanya M. Daigle President** **4/19/04** **(239) 851-1859**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone