2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2005 08:00 AM Secretary of State

DOCUMENT # P03000115383 1. Entity Name LORETTE RICHARD REALTOR, P.A.		Secretary of State
Principal Place of Business 1918 INNISBROOK CT VENICE, FL 34293 US Mailing Address 1918 INNISBROOK CT VENICE, FL 34293 US VENICE, FL 34293 US		
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent		03182005 No Chg-P CR2E034 (10/03) 1. FEI Number
BETTERTON, GREG A 981 RIDGEWOOD AVE. SUITE 101 VENICE, FL 34293		DO NOT WRITE
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 II applicable (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees		
10. OFFICERS AND DIRECTORS TITLE P,VP NAME RICHARD, LORETTE STREET ADDRESS 1918 INNISBROOK CITY-ST-ZIP VENICE, FL 34293 TITLE		U00000231154 04/07/05-80819-008 150.00
NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME	_	IN THIS SPACE
STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP		The state of the s
12. I hereby certify that the information supplied with this filling 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date Description Description		

941-650-8425