

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90107 035 ***150.00

DOCUMENT # P03000123011					
1. Entity Name WARWICK ESTATES, INC.					
Principal Place of Business 1858 RINGLING BLVD. SARASOTA, FL 34236			Mailing Address 46 NORTH WASHINGTON BLVD. #1. SARASOTA, FL 34236		
2. Principal Place of Business		3. Mailing Address 1858 Ringling Blvd			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Sarasota, Fl.		4. FEI Number 20-0371056	
Zip		Zip 34236		Country USA	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent PATTERSON, JOHN 46 NORTH WASHINGTON BLVD., #1 SARASOTA, FL 34236			7. Name and Address of New Registered Agent Name LPS CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 46 N. WASHINGTON BLVD. SUITE 1 City SARASOTA FL Zip Code 34236		
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: (NOTE: Registered Agent signature required when reinstating) DATE:					
E. ZACHARY RANS, its Vice President FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D,P GOUDGE, CATHERINE ANNE 1858 RINGLING BLVD SARASOTA FL 34236 <input type="checkbox"/> Change XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D,V BIRCH, CAROLINE ELIZABETH 1858 RINGLING BLVD. SARASOTA FL 34236 <input type="checkbox"/> Change XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GLENDINNING, RENE M. 1858 RINGLING BLVD. SARASOTA, FL 34236 <input type="checkbox"/> Change XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RITCHLEY, DAVID MARTIN 1858 RINGLING BLVD. SARASOTA FL 34236 <input type="checkbox"/> Change XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RITCHLEY, ANNA MARGARET 1858 RINGLING BLVD. SARASOTA, FL 34236 <input type="checkbox"/> Change XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOMERSET, RICHARD JAMES 1858 RINGLING BLVD. SARASOTA, FL 34236 <input type="checkbox"/> Change XX Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:			Date: 4/12/04 (941) 365-4617		
RENE M. GLENDINNING, Secretary					