2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2005
Secretary of State

DOCUMENT# P03000136808

Entity Name: M C STEVENS REALTY INC.

Current Principal Place of Business:

906 SOUTH ORANGE STREET
MADISON, FL 32340

New Principal Place of Business:

624 SOUTH ORANGE STREET
SUITE 2
MADISON, FL 32340

Current Mailing Address:

906 SOUTH ORANGE STREET
MADISON, FL 32340

New Mailing Address:

624 SOUTH ORANGE STREET
SUITE 2
MADISON, FL 32340

FEI Number: 20-0400270 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEVENS, MARCIA D
906 SOUTH ORANGE STREET
MADISON, FL 32340 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: STEVENS, MARCIA D
Address: 906 SOUTH ORANGE STREET
City-St-Zip: MADISON, FL 32340

Title: VP ( ) Delete
Name: BROWN, YVONNE
Address: 506 SW COLUMBIA STREET
City-St-Zip: MADISON, FL 32340

Title: SEC ( ) Delete
Name: ALEXANDER, MARLOS
Address: 906 SOUTH ORANGE STREET
City-St-Zip: MADISON, FL 32340

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: STEVENS, WILLIE JR.
Address: 2903 ANDERSON DR.
City-St-Zip: FT. PIERCE, FL 32340

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DEC ( ) Change (X) Addition
Name: BROWN, YVONNE
Address: 506 W COLUMBIA ST.
City-St-Zip: MADISON, FL 32340

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARCIA D. STEVENS PRES 05/01/2005

Electronic Signature of Signing Officer or Director Date