
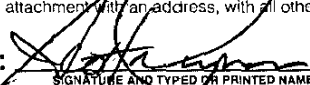


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 20, 2004 8:00 am**  
**Secretary of State**

01-20-2004 90083 027 \*\*\*150.00

<b>DOCUMENT # P03144</b>					
1. Entity Name. <b>CONAM REAL PROPERTY SERVICES CORP.</b>					
Principal Place of Business <b>%CONTINENTAL AMERICAN PROPERTIES, LTD. 1764 SAN DIEGO AVENUE SAN DIEGO, CA 92110</b>			Mailing Address <b>ATTN: LEGAL DEPT. 1764 SAN DIEGO AVENUE SAN DIEGO, CA 92110 US</b>		
2. Principal Place of Business <b>3990 Ruffin Road</b>			3. Mailing Address <b>3990 Ruffin Road</b>		
Suite, Apt. #, etc. <b>Suite 100 Attn: Legal</b>			Suite, Apt. #, etc. <b>Suite 100 Attn: Legal</b>		
City & State <b>San Diego, CA</b>			City & State <b>San Diego, CA</b>		
Zip <b>92123</b>		Country <b>USA</b>	Zip <b>92123</b>		Country <b>USA</b>
4. FEI Number <b>33-0054464</b>			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			<b>\$8.75</b> Additional Fee Required		
6. Name and Address of Current Registered Agent  <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> 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	PD EPSTEIN, DANIEL J. %1764 SAN DIEGO AVENUE SAN DIEGO, CA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Epstein, Daniel J. % 3990 Ruffin Road, Suite 100 San Diego, CA 92123 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DUPREE, SCOTT 1764 SAN DIEGO AVE SAN DIEGO, CA 92110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD Dupree, Scott 3990 Ruffin Road, Suite 100 San Diego, CA 92123 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SVATOS, ROBERT J 1764 SAN DIEGO AVE SAN DIEGO, CA 92110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Svatos, Robert J 3990 Ruffin Road, Suite 100 San Diego, CA 92123 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FORRESTER, J BRADLEY 1764 SAN DIEGO AVE SAN DIEGO, CA 92110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Forrester, J Bradley 3990 Ruffin Road, Suite 100 San Diego, CA 92123 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT TILLEY, RAPLH W 1764 SAN DIEGO AVE SAN DIEGO, CA 92110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT Tilley, Ralph W 3990 Ruffin Road, Suite 100 San Diego, CA 92123 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: 		E. Scott Dupree, Vice President		1/13/04 (858) 614-7200	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	