


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 12, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03262</b> 1. Entity Name BLUE LINE REALTY, INC.	
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Principal Place of Business 330 FIFTH AVENUE SUITE 400 NEW YORK, NY 10001	Mailing Address 330 FIFTH AVENUE SUITE 400 NEW YORK, NY 10001
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<b>DO NOT WRITE IN THIS SPACE</b>
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03102004 No Chg-P CR2E034 (10/03)

4. FEI Number 58-1580284	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent  GILDAN, HERBERT L. 1645 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33402
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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)</small>	DATE _____

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be</b> <b>Added to Fees</b>	U000000109726 04/12/04-80055-001 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ORR, KENNETH R 330 FIFTH AVENUE- STE. 400 NEW YORK, NY 10001
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFD HAUCK, DAVID W 77 EAST ANDREWS DR., N.W. #369 ATLANTA, GA 30305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SNYDER, GARY E. 3290 NORTHSIDE PKWY. STE. 400 ATLANTA, GA 30327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: <i>Kenneth R. Orr</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date: <i>4/7/04</i> Daytime Phone # _____

KENNETH R. ORR