# FILED
# Jan 20, 2004 8:00 am
# Secretary of State
01-20-2004 90047 022 ***150.00

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P12672

1. Entity Name
SUNSET REALTY CORP.

| Principal Place of Business | Mailing Address |
|---|---|
| 7181 COLLEGE PKWY<br>STE 38<br>FT. MYERS, FL 33907 US | 7181 COLLEGE PKWY<br>STE 38<br>FT. MYERS, FL 33907 US |

01092004 Chg-P CR2E034 (10/03)

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 13-3007115 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2004 Fee will be $550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | | |
|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | CBD<br>SCHWARTZ, STEPHEN L.<br>126 EAST 56 STREET<br>NEW YORK, NY | ☐ Delete |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>VAN CLIEF, MARY ANN<br>126 EAST 56 STREET<br>NEW YORK, NY | ☐ Delete |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V<br>FARR, E. DRAYTON JR<br>115 WEST OLYMPIA AVENUE<br>PUNTA GORDA, FL | ☒ Delete |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VS<br>HALL, VALERIE<br>7181 COLLEGE PKWY, STE 38<br>FT. MYERS, FL 33907 | ☐ Delete |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>SCHWARTZ, SAMUEL R.<br>126 EAST 56 STREET<br>NEW YORK, NY | ☒ Delete |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☒ Change ☐ Addition

| | | |
|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 400 KELBY STREET 16TH FL<br>FORT LEE, N.J. 07024 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 400 KELBY STREET 16TH FL<br>FORT LEE, NJ. 07024 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ASSIS VP AND ASSIS SEC.<br>VICTOR BIGGS.<br>7181-38 COLLEGE PKWY<br>FORT MYERS, FL 33707 | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V.P.<br>KAREN HART<br>400 KELBY STREET, 16TH FL<br>FORT LEE, NJ. 07024 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TREAS<br>MARIA PRIGOREANU<br>400 KELBY STREET 16TH FL<br>FORT LEE, N.J. 07024 | ☐ Change ☒ 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: Valerie Hall Vice President 1-9-04 239-275-0002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

VALERIE A HALL