

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000034061

Entity Name: ESLINGER REALTY, INC.

FILED
Jan 26, 2005
Secretary of State

Current Principal Place of Business:

4801 SWEESHAD DR.
SARASOTA, FL 34241

New Principal Place of Business:

Current Mailing Address:

4801 SWEESHAD DR.
SARASOTA, FL 34241

New Mailing Address:

FEI Number: 65-0411045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESLINGER, JEFFREY D
1884 OAK BRANCH DRIVE
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

ESLINGER, JEFFREY D
4801 SWEETSHADE DR.
SARASOTA, FL 34241 US

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: JEFFERY D. ESLINGER

01/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ESLINGER, JEFFREY D
Address: 4801 SWEESHAD DR.
City-St-Zip: SARASOTA, FL 34241

Title: O () Delete
Name: ESLINGER, SANDRA M
Address: 4801 SWEESHAD DR.
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JEFFERY D. ESLINGER

P

01/26/2005

Electronic Signature of Signing Officer or Director

Date