2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000077881

1. Entity Name
LONGVIEW REALTY, INC.

Principal Place of Business	Mailing Address
6400 GULF OF MEXICO DR SUITE E LONGBOAT KEY, FL 34228 US	1800 SECOND STREET 799 SARASOTA, FL 34236 US

DO NOT WRITE IN THIS SPACE

01052004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0535643	Not Applicable

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

6. Name and Address of Current Registered Agent

CHAPMAN, SUSAN ATTY
1800 SECOND STREET, STE 799
SARASOTA, FL 34236

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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: _Susan Chapman_   SUSAN CHAPMAN   1/6/03
Signature, typed or printed name of registered agent and title if applicable.   (NOTE Registered Agent signature required when reinstating)   DATE

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	VS
NAME	ESTRIN, ALISON S.
STREET ADDRESS	6555 BAYOU HAMMOCK RD
CITY-ST-ZIP	LONGBOAT KEY, FL 34228
TITLE	P
NAME	ESTRIN, RICHARD W
STREET ADDRESS	6555 BAYOU HAMMOCK RD
CITY-ST-ZIP	LONGBOAT KEY, FL 34228
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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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02/05/04-80092-017 150.00

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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: _Richard W. Estrin_   RICHARD W. ESTRIN   1/7/04   (941) 383-6112
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #