

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90256 041 ***150.00

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1. Entity Name
FIRST REALTY SERVICES, INC.



Principal Place of Business
11705 LYNMOOR DR
RIVERVIEW, FL 33569 US

Mailing Address
P O BOX 1010
RIVERVIEW, FL 33568 US

94072511

2. Principal Place of Business

105 Kenley Way

3. Mailing Address

Suite, Apt. #, etc.

04162004 Chg-P CR2E034 (10/03)

City & State

Sun City Center, FL

City & State

4. FEI Number

65-0548396

Applied For

Not Applicable

Zip
33573

Country
US

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARDINER, ROBERT B
11705 LYNMOOR DR
RIVERVIEW, FL 33569

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

105 Kenley Way

City

Sun City Center

FL

Zip Code

33573

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

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 PT
NAME GARDINER, ROBERT B
STREET ADDRESS 105 KENLEWY WAY
CITY-ST-ZIP TRILBY, FL 33593

TITLE VPS
NAME GARDINER, JACQUELINE C
STREET ADDRESS 105 KENLEY WAY
CITY-ST-ZIP SUN CITY CENTER, FL 33573

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 105 Kenley Way
CITY-ST-ZIP Sun City Center, FL 33573

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Robert B. Gardiner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/04 (813) 672-0400

Date

Daytime Phone #

note Address change