2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000063084

Entity Name: PARADISE REALTY ASSOCIATES, INC.

FILED Feb 27, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

3501 DEL PRADO BLVD

SUITE 100

CAPE CORAL, FL 33904 US

Current Mailing Address: New Mailing Address:

3501 DEL PRADO BLVD

SUITE 100

CAPE CORAL, FL 33904 US

FEI Number: 65-0599988 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAHILL, JAMES P DONNELLY, BRUCE R 3501 DEL PRADO BLVD 3501 DEL PRADO BLVD

SUITE 100 SUITE 100

CAPE CORAL, FL 33904 US CAPE CORAL, FL 33904 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: BRUCE R. DONNELLY 02/27/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 $\label{eq:title:v} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

Name: DONNELLY, BRUCE R Name: DONNELLY, BRUCE R

Address: 15055 TAMARIND CAY CT., 1210 Address: 3501 DEL PRADO BLVD., SUITE 100

City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: CAPE CORAL, FL 33904

Title: VP () Delete Title: VP (X) Change () Addition

Name: KRAUL, TORSTEIN Name: KRAUL, TORSTEN

Address: 1426 SHELBY PKWY Address: 3501 DEL PRADO BLVD., SUITE 100

City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904

Title: () Delete Title: P () Change (X) Addition

Name: Name: SCHMIDT, HENRY

Address: Address: 3501 DEL PRADO BLVD., SUITE 100

City-St-Zip: CAPE CORAL, FL 33904

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: BRUCE DONNELLY V 02/27/2004