2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000019447



FILED Mar 07, 2003 8:00 am { Secretary of State ,

1. Entity Nar		ENS REALTY, INC				03-07-2003 90109 006 ***150.00							
Principal Pla 6181 TEAHOI VENICE FL 3		s	Mailing Address 6181 TEAHOUSE RD. VENICE FL 34293										
2. Principal I	Place of Busir	ness	3. Mailing Address	3. Mailing Address									
Suite, Apt	. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & State			City & State			4. FE	4. FEI Number 65-0664442 Applied F						
Zíp	Zip Country		Zip	Country		5. Ce	ertificate of Statu	s Desired		B.75 Added Require	ditional		
6. Name and Address of Current Registered Agent					41. 4	7. Na	me and Addres	s of New Reg	istered Ag	ent			
		-		Name									
KORP, WILLIAM R 333 S. TAMIAMI TRAIL					Street Address (P.O. Box Number is Not Acceptable)								
SUITE 199						· ·		.					
VENICE F	L 34285			City					FL	Zip Cod	e		
8. The above the obligat	e named entity tions of regist	submits this statement for ered agent.	or the purpose of changing its	registered	office or reg	gistered agen	t, or both, in the	State of Florid	la. I am fan	niliar with,	and accept		
SIGNATURE		or printed name of registered agent	and title if applicable. (NOTE	: Registered Aç	ent signature re	equired when reins	tating)		DATE	·			
Afte	r May 1, 200	FEE IS \$150.00 Fee will be \$550.00 Florida Department o				9. Election Ca Trust Fund	ampaign Finan Contribution.	cing	\$5.0 Added	0 May Be to Fees			
10.		OFFICERS AND	DIRECTORS	11.	•	ADDI	TIONS/CHANG	ES TO OFFICE	RS AND D	IRECTORS	3 IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NEWELL, I 641 DELPI VENICE FL		⊠ Delete	TITLE NAME STREET A CITY-ST-	DDRESS 6	ewell, 41 Del	Herber	t Jr.		.] Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Brady, Ei	DWIN L NGE BLOSSOM	⊠ Delete	TITLE NAME STREET A CITY-ST-	DDRESS 7IP 5	P igali, 791 Su	John nflower		C] Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NELSON, (551 ORIEN VENICE FL	ital poppy dr.	, 😡 Delete	TITLE NAME STREET A CITY-ST-	DDRESS W 5	ilson, 681 Te	Diane ahouse	ره مند نیز ۵ س	C	Change	⊠ Addition .		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Taylor, J 730 Dahli Venice Fl	Ä	☐ Delete	TITLE NAME STREET A	DDRESS	enice,	FL 34	293] Change	Addition		
TITLÉ NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AI CITY-ST-		-		•] Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AL CITY-ST-] Change	Addition		

12. I hereby certify that the information supplied with this filling 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: