2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 26, 2004 08:00 AM Secretary of State DOCUMENT # P97000006348 1. Entity Name SUNBELT REALTY GROUP, INC. Principal Place of Business Mailing Address 997 N COLLIER BLVD 997 N COLLIER BLVD STE G STE G MARCO ISLAND, FL 34145 MARCO ISLAND, FL 34145 03312004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0725551 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SNYDER, WILLIAM F DO NOT WRITE 997 N COLLIER BLVD STE G IN THIS SPACE MARCO ISLAND, FL 34145 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) <u> 1560616000000</u> 04/26/04-80137-025 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME REINDERS, JAMES M STREET ADDRESS 997 N COLLIER BLVD STE G CITY-ST-ZIP MARCO ISLAND, FL 34145 DVST TITLE NAME SNYDER, WILLIAM F. STREET ADDRESS 997 N COLLIER BLVD STE G CITY-ST-ZIP MARCO ISLAND, FL 34145 TITLE NAME STREET ADDRESS DO NOT WRITE CRY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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.

ED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

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