2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

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DOCUMENT # P97000008218

CLW REALTY GROUP OF ARIZONA, INC.



FILED Apr 01, 2004 08:00 AM Secretary of State

Principal Place of Business

4301 ANCHOR PLAZA PKWY

SUITE 400 TAMPA, FL 33634

Mailing Address

4301 ANCHOR PLAZA PKWY

SUITE 400

TAMPA, FL 33634



01122004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3441673

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARTER, CRAIG 4301 ANCHOR PLAZA PKWY SUITE 400 TAMPA, FL 33634

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		1			
e named entity submits this statement for the pations of registered agent.	urpose of changing its r	egistered office or	registered agent, or both	n, in the State of Florida. I am familiar with, and	i accep
					<u> </u>
Signature, typed or printed name of registered agent and title	f applicable. (NOTE:	Registered Agent signatur	re required when reinstating)	DATE	
LE NOW!!! FEE IS \$150.00 lay 1, 2004 Fee will be \$550.00	, , •		\$5.00 May Be Added to Fees		
OFFICERS AND DIREC	TORS	1 1	· 		
D VARSAMES, LOUIS DDRESS 4301 ANCHOR PLAZA PKWY STE 400 TAMPA, FL 33634				U00000100868 04/01/04-80024-003 158.	7 5
D					
	stions of registered agent. Squaure, typed or printed name of registered agent and title in the square of the squ	Signature, typed or printed name of registered agent and title if poplicable. (NOTE: LE NOW!!! FEE IS \$150.00 Trust Fund Contri OFFICERS AND DIRECTORS D VARSAMES, LOUIS 4301 ANCHOR PLAZA PKWY STE 400 TAMPA, FL 33634	Signature, typed or printed name of registered agent and lide if applicable. RNOTE: Registered Agent signature. Proceedings of printed name of registered agent and lide if applicable. RNOTE: Registered Agent signature. RNOTE: Registered Agent signature. Proceding Trust Fund Contribution. OFFICERS AND DIRECTORS D VARSAMES, LOUIS 4301 ANCHOR PLAZA PKWY STE 400 TAMPA, FL 33634	Signature, typed or printed name of registered agent and title if explicable. (NOTE: Registered Agent signature required when reinstating) LE NOW!!! FEE IS \$150.00 Trust Fund Contribution. OFFICERS AND DIRECTORS D VARSAMES, LOUIS 4301 ANCHOR PLAZA PKWY STE 400 TAMPA, FL 33634	Signature, typed or printed name of registered agent and tide if poplicable. RNOTE: Registered Agent signature required when reinstating) PATE LE NOW!!! FEE IS \$150.00 OFFICERS AND DIRECTORS D VARSAMES, LOUIS 4301 ANCHOR PLAZA PKWY STE 400 TAMPA, FL 33634 RNOTE: Registered Agent signature required when reinstating) \$5.00 May Be Added to Fees ID 00000100868 U00000100868 U4/81/04-80024-003 158

ROTHSCHILD, DOUGLAS 4301 ANCHOR PLAZA PKWY ST E400 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33634 TITLE LAUER, BRUCE 4301 ANCHOR PLAZA PKWY STE 400 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33634 TITLE WILKINS, WILLIAM NAME STREET ADDRESS 4301 ANCHOR PLAZA PKWY STE 400 TAMPA, FL 33634 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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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 strue 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 trusted emphasized 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:

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

31/2/05

(813) 349-8584