

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000030995	
1. Entity Name BETTY J. DYLES REALTY, INC.	

Principal Place of Business 2120 DR MLK JR ST. SO. ST PETERSBURG, FL 33705	Mailing Address 2120 DR MLK JR ST. SO. ST PETERSBURG, FL 33705
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DO NOT WRITE IN THIS SPACE

	
01292004 No Chg-P	CR2E034 (10/03)
4. F&F Number 59-3434876	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent DYLES, BETTY J 2120 DR M.L. KING ST S SAINT PETERSBURG, FL 33705	DO NOT WRITE IN THIS SPACE
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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 reissuing)	DATE _____
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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	U000000104232 04/05/04-80089-013 158.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD DYLES, BETTY J 2120 9TH ST. SOUTH SAINT PETERSBURG, FL 33705
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V PAIGE, JESSE 2120 DR MLK JR. ST. SO. SAINT PETERSBURG, FL 33705
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V BROWN, MISHALL M 2120 DR MLK JR ST. SO. SAINT PETERSBURG, FL 33705
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: <u>Betty J. Dyles President</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	29 Jan 04 727-894-9752 Daytime Phone #
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