2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

	, 4141		10714 114	_,								
DOCUMENT # P97000077346 1. Entity Name FIRST RESIDENTIAL REALTY SERVICES, INC.							JP.		FEB 25			
Principal Place	S		_	ΔM	SEC	化注意		3.12				
760 S VOLUS	SIA AVE		760 S VOLUS	O S VOLUSIA AVE			100	TALL	reia. Augst	E.D.	JDID'Y	
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ORANGE CITY	r, FL 32763		ORANGE CITY, FL 32763					4 4 <i>0</i> 05			ع (اماة الله	
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			0	02092004	Chg-P	CR2E034	(10/03)		
City & State			City & State		4.	4. FEI Number 59-3558961			Applied For Not Applicable			
Zip	Country		Zip Coun		ıtry	5. Certificate of Status Desired			S8.75 Additional Fee Required			
	6. Name	and Address of Current I	Registered Agent		7. Name and Address of New Registered Agent							
		Name Gregory B. Ruckert										
WANAMAKER, JOANNE 102'JAMES POND COURT								<u>.</u>				
DEBARY.				0.100174304	Street Address (P.O. Box Number is Not Acceptable)							
DEBART,	1 L 32/13	•										
		City D	City Ormore Cry FL 2005296									
8. The above	named entit	y subment for	the purpose of ch	anging its register					rida. I am la	niliar with.	and accept	
the obligati	ions of regis	erogenturit.			_		-		,	,	.]	
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\$IGNATURE_	Signeth d, typed	or pristed name of registered agent &	rul title il applicable.	(NOTE: Register	ed Agent signature re	quired when	n reinstating)		OLTE /	/ - /	- 1	
9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Added to Fees												
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFF	CERS AND D	IRECTORS	IN 11	
TITLE	۵		20		r 1	0	·····	1171 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		Change	Addition	
NAME	WANNAMAKER, JOANNE				NULL JOHN AMAKEN L							
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TITLE	D			elete IIII.	E /	Pass	in and	•		Change	Addition	
NAME	BARRY, (CHARLES	KAM		E (CARE	L WIN	SLOW LEW ORIVE	•		74	
STREET ADDRESS				STR		48 5	MING G	ien Orive				
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indicated	l on this repo	e information supplied with it or supplemental report is	true and accurate	and that my signs	ature shall have	the sam	ne legal effec	t as if made under o	oath: that I arr	an officer	or director	
of the cor	rporation or t	he receiver or trustee empo achment with an address, y	wered to execute i	this report as requ	ired by Chapte	r 607, Fk	lorida Statuta	s; and that my name	appears in l	Block 10 or	Block 11 if	
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SIGNATURE: SUMMITTEE DAY PRINTED DAY PRINTED DAY PRINTED DAY PRINTED DAY PRINTED DAY PRINTED DAY PRINTED DAY PRINTED DAY PRINTED PRODUCT OF DEPARTMENT PRODUCT OF DEPARTMENT PRODUCT DAY PRINTED PRODUCT DAY PRINTED DAY PRINT												
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