## **FILED** Feb 23, 2005 08:00 AM Secretary of State

ANNUAL REPORT				
DOCUMENT # P9700081  1. Entity Name PANTHER WOODS REALTY, INC.	216			
Principal Place of Business 9402 MEADOWOOD DRIVE FORT PIERCE, FL 34951	Mailing Address % ESTEIN & ASSOCIATES, U.S.A., LTD. 5211 INTERNATIONAL DRIVE ORLANDO, FL 32819			
DO NOT WRITE	IN THIS SPA			

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02172005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0786716

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ESTEIN, LOTHAR 5211 INTERNATIONAL DRIVE ORLANDO, FL 32819

## DO NOT WRITE IN THIS SPACE

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 alte if applicable. (NOTE, Registered Agent signature required when reinstating)  DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Financ Trust Fund Contribution.	sing \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS	· · · · · · · · · · · · · · · · · · ·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES GOLDBERG, LEN 9402 MEADOWOOD DRIVE FORT PIERCE, FL 34951			<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOLDBERG, STEPHEN 9402 MEADOWOOD DRIVE FORT PIERCE, FL 34951			U2/23/05-80025-004 158.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DALY, JULIE 9402 MEADOWOOD DRIVE FORT PIERCE, FL 34951		DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			in <sup>-</sup>	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME. STREET ADDRESS GITY-ST-ZIP		، دو ي				
12. I hereby o	ertify that the information supplied with this filling	ng does not qualify for the exem	ption 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 offect 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lothar Estein

2/18/2005

(407) 354-3307