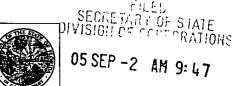
2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P97000104892

FLORIDA ATLANTIC REALTY CORPORATION



05 SEP -2 AM 9: 47

Principal Place of Business

Mailing Address

1117 SCHEFFLERA DRIVE CAPTIVA, FL 33924

875 NORTH MICHIGAN AVENUE SUITE 3620 CHICAGO, IL 60611



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08312005 No Chg-P CR2E034 (10/03) Applied For 4. FEI Number 58-2364045 Not Applicable

\$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

MANSUR, E B 1117 SCHEFFLERA DRIVE CAPTIVA, FL 33924

SIGNATURE:

DO NOT WRITE IN THIS SPACE

					•
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				required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Finan Trust Fund Contribution.			eing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIRE	CTORS			I
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MANSUR, E.B. 1117 SCHEFFLERA DRIVE CAPTIVA, FL 33924			Q(00059678490 5/0501045017 **1430.00
TITLE NAME STREET ADDRESS CITY+ST-ZIP	T KOEPLIN, KURT 801 PARK AVENUE WILMETTE, IL 60091			09/19	5/0501045017 **1430.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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.					