

## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P98000052254</b> 1. Entity Name SPINNAKER REALTY ASSOCIATES, INC.		
Principal Place of Business 1400 NORTH 59 TERRACE HOLLYWOOD, FL 33021	Mailing Address 1400 NORTH 59 TERRACE HOLLYWOOD, FL 33021	
<b>DO NOT WRITE IN THIS SPACE</b>		
<div style="text-align: right;">07092004    No Chg-P    CR2E034 (10/03)</div>		
4. FC# Number 65-0841645		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
6. Name and Address of Current Registered Agent  SWENSON, PHYLLIS 1400 NORTH 59 TERRACE HOLLYWOOD, FL 33021		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ DATE _____ <small>(Print or type name of registered agent and his residence) (NOTE: Registered Agent must be a resident of Florida)</small>		
<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
<b>10. OFFICERS AND DIRECTORS</b>		
TITLE NAME STREET ADDRESS CITY ST ZIP	P SWENSON, PHYLLIS 1400 N 59 TERR HOLLYWOOD, FL 33021	
TITLE NAME STREET ADDRESS CITY ST ZIP	U00000165879 07/12/04-80030-020 150.00  <b>DO NOT WRITE IN THIS SPACE</b>	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(c), 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. If in all other like empowered.		
SIGNATURE: <b>7/8/04 954-383-4206</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		