

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 25, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000082301

1. Entity Name
LOSILLIAS REALTY, INC.



Principal Place of Business
4022 LOSILLIAS DR.
SARASOTA, FL 34238

Mailing Address
4022 LOSILLIAS DR.
SARASOTA, FL 34238



01272005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0877164

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LEE, H G
2014 FOURTH STREET
SARASOTA, FL 34237

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-23-05

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME JENSEN, BETTY J
STREET ADDRESS 4022 LOSILLIAS DR.
CITY-ST-ZIP SARASOTA, FL 34238

TITLE VPD
NAME JENSEN, KAI L
STREET ADDRESS 3100 PLEASANT LN
CITY-ST-ZIP RACINE, WI 53405

TITLE STD
NAME SCHWARTZBAUM, JUDITH A
STREET ADDRESS 5840 TIDEWOOD AVE
CITY-ST-ZIP SARASOTA, FL 34231

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

000000276714
03/25/05-R0050-015 150.00

**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)(f), 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:

JUDITH A. SCHWARTZBAUM S.T.

Date

Daytime Phone #

3-23-05 941-369-7744