2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000052330

Entity Name

THE DANTON GROUP REAL ESTATE COMPANY

6. Name and Address of Current Registered Agent



FILED
May 02, 2005 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

350 SOUTH COUNTY ROAD

350 SOUTH COUNTY ROAD SUITE 201

SUITE 201 PALM BEACH, FL 33480

PALM BEACH, FL 33480



DO NOT WRITE IN THIS SPACE

04282005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-3507508 Applied For Not Applicable

5. Cortificate of Status Desired

\$8.75 Additional Fee Required

DANTON, RICHARD 350 SOUTH COUNTY ROAD

SUITE 201 PALM BEACH, FL 33480

DO NOT WRITE IN THIS SPACE

	·	E.			
	named entity submits this statement for the plons of registered agent.	urpose of changing its registere	d office or re	egistered agent, or bo	oth, in the State of Florida, I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing 🗆	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS DAWTON, RICHARD 350 SO COUNTY RD PALM BEACH, FL 33480				H0000H356052
NAME STREET ADDRESS CITY-SI-ZIP					95/64/05-86020-012 158, 75
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-ZP					
TITLE NAME STREET ADDRESS					

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 eath; 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 of an attachment with an eddress, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

NEMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/05

561-802-422

Devlime Shore #