

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2005 8:00 am
Secretary of State

03-23-2005 90022 016 ***150.00

DOCUMENT # S87900

1. Entity Name
FIRST IN REAL ESTATE CORPORATE CENTER, INC.



Principal Place of Business

~~32660 US 19 NORTH~~ 2560 Enterprise Rd
~~PALM HARBOR, FL 34684~~
CLEARWATER, FL 33759

Mailing Address

ATTN TERRY HASLEY
411 WINDWARD PASSAGE
CLEARWATER, FL 33767-2330

40036130



DO NOT WRITE IN THIS SPACE

01132005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0304677

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

HASLEY, STEVEN M
~~32660 US 19 NORTH~~ 411 Windward Passage
~~PALM HARBOR, FL 34684~~ Clearwater, FL 33767

**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

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

Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HASLEY, STEVEN M.
STREET ADDRESS	32660 US 19 NORTH 2560 Enterprise Rd.
CITY-ST-ZIP	PALM HARBOR, FL Clearwater, FL 33759
TITLE	SDT
NAME	HASLEY, TERRY M.
STREET ADDRESS	32660 US 19 NORTH 411 Windward Passage
CITY-ST-ZIP	PALM HARBOR, FL Clearwater, FL 33767
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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)(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.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

x 3-14-05 x(727) 449-8544