2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V05308 1. Entity Name SWENSON REALTY, INC. Principal Place of Business Mailing Address 2 BARRACUDA LANE/ORC KEY LARGO, FL 33037 2 BARRACUDA LANE/ORC KEY LARGO, FL 33037

SIGNATURE:

FILED Apr 09, 2004 08:00 AM Secretary of State

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				04022004	4022004 No Chg-P CR2E034 (10/03)		
				4. FEI Numbe 65-0304			lied For Applicable
					of Status Desired	□ \$8.75 Addit	
	6. Name and Address of Current Regis	tored Agent		5. Cermicate C	or Status Desired	Fee Required	
SWENSON, PETER K C/O SWENSON REALTY 2 BARRACUDA LANE/ORC KEY LARGO, FL 33037			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, 2004 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			icing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS		· · · · · · · · · · · · · · · · · · ·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST SWENSON, PETER 2 BARRACUDA LANE KEY LARGO, FL 33037						
TITLE NAME STREET ADDRESS CITY -ST - ZIP					#867000 04/09/04	107989 80032-024 150	.00
TITLE NAME STREET ADDRESS CITY ST-ZIP				DO	NOT W	RITE	
NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
ITILE NAME STREET AODRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filling 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.							

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President