

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 06, 2005 08:00 AM
Secretary of State

DOCUMENT # V59252 1. Entity Name BLUE MARLIN REALTY, INC.	
--	---

Principal Place of Business 4101 RAVENSWOOD ROAD STE 226 FT LAUDERDALE, FL 33312 US	Mailing Address 4101 RAVENSWOOD ROAD STE 226 FT LAUDERDALE, FL 33312 US
--	--

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent DUKE, WALTER B III 4101 RAVENSWOOD ROAD STE 226 FT LAUDERDALE, FL 33312	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	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
---	--	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DUKE, WALTER B. III 4101 RAVENSWOOD RD STE 226 FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCLEMORE, SCOTT M. 4101 RAVENSWOOD RD STE 226 FT LAUDERDALE, FL 52
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CLOBUS, ROBERT D. 4101 RAVENSWOOD RD STE 226 FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000172882
01/06/05-80012-020 150.00

**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)(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: _____ **1/4/2005** **(954) 587-2703**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #