

FILED**May 03, 2004 08:00 AM**
Secretary of State**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # V61546	
1. Entity Name PREFERRED PROFESSIONAL PROPERTIES, INC.	

Principal Place of Business 1603 INDIAN ROCKS RD LARGO, FL 33774 US	Mailing Address 1603 INDIAN ROCKS RD LARGO, FL 33774 US
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04152004 No Chg-P CR2E004 (10/03)

4. FEI Number 59-3149638	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**NAPIER, JAMES A JR
1603 INDIAN ROCKS RD
LARGO, FL 33774**
**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 fee 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 Financing
Trust Fund Contribution. ☐
\$5.00 May Be
Added to Fees
10. OFFICERS AND DIRECTORS

TITLE	DST
NAME	PAPPAGEORGE, VICKI G
STREET ADDRESS	2350 KINGS POINT DR
CITY-ST-ZIP	LARGO, FL 33774
TITLE	DP
NAME	NAPIER, JAMES A JR
STREET ADDRESS	2350 KINGS POINT DRIVE
CITY-ST-ZIP	LARGO, FL 33774
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

 000000149550
 05/03/04-80191-020 150.00
**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)(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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JAMES NAPIER, JR 4/24/04 (407) 585-5155