2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 02, 2004 8:00 am Secretary of State 02-02-2004 90043 011 ****61.25

1. Entity Nan	MENT # 762100 CIVIC IMPROVEMENT AS	SOCIATION, INC.						01.23	
Principal Place P.O.BOX 683 ORLANDO, F		Mailing Address P.O.BOX 683166 ORLANDO, FL 32808	US		1 (1821) (1821)	44006 1 1010 1010 1010 1010		CIAU BIRNI CIN	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01202004	Chg-NP	CR2E037	(10/03)	
City & State		City & State			4. FEI Number 59-2315	297			optied For ot Applicable
Zip	Country	Zip	Cour		5. Certificate o	Status Desired		8.75 Add se Require	
	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New	Registered Ag	ent	
CAMPAGNE, ALMA E BILL BRYAN STATE FARM AGENCY 5470 CENTRAL FLORIDA PARKWAY				Name Street A	Address (P.O. Box Number is Not Acceptable)				
), FL 32821					· · · · · · · · · · · · · · · · · · ·			
				City			FL	Zip Cod	e
8. The above the obligat	n named entity submits this statement folions of registered agent. Jhnu Luu Signature, typed or printed name of registered agent	mpagne			registered agent, or both	, in the State of F	30 0	_	and accept
	The state of the s	The Book approximation (1907)	E: Hagistore	C Agent agreed	ne sedmen was teneramed)		54,5		
	Filing Fee is \$61.25 Due by May 1, 2004	9. Election Ca Trust Fund	mpaign F	inancing	\$5.00 May Be Added to Fees		Make check inda Departs		
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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 617, 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:

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR

A07-646 4175