## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H59358

FILED Apr 27, 2004 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place	of Business:
	NESAW STRI S, FL 33916	EET		
urrent M	lailing Addre	ss:	New Mailing Address	s:
	NESAW STRI S, FL 33916	EET		
El Number	: 59-2536678	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
ווסחבדד	E, WILLIAM F			
5291 SAI	M SNEAD LAN ERS, FL 339	1E		
5291 SAI J. FT. MY he above	M SNEAD LAN ERS, FL 3391	JE 17	urpose of changing its registere	d office or registered agent, or both,
5291 SAI J. FT. MY he above	M SNEAD LANERS, FL 339° named entity e of Florida. RE:	NE 17 submits this statement for the p		d office or registered agent, or both,
5291 SAN N. FT. MY The above In the State	M SNEAD LANERS, FL 339° named entity e of Florida. RE:	JE 17		d office or registered agent, or both,  Date
5291 SAI N. FT. MY The above In the State	M SNEAD LANERS, FL 339° named entitye of Florida.  RE: Electro	NE 17 submits this statement for the p		
5291 SAI N. FT. MY The above In the State SIGNATUI	M SNEAD LANERS, FL 339° named entitye of Florida.  RE: Electro	NE 17 submits this statement for the p nic Signature of Registered Age ng Trust Fund Contribution ( ).	ent	
5291 SAI N. FT. MY The above In the State SIGNATUI	M SNEAD LANERS, FL 339° e named entity e of Florida.  RE:  Electro mpaign Financir S AND DIRECT	SE submits this statement for the point Signature of Registered Age of Trust Fund Contribution ( ).  CTORS:  ) Delete of W., AVENUE	ent	Date
5291 SAI I. FT. MY The above in the State SIGNATUI Lection Cal DFFICER title: ame: ddress:	M SNEAD LAN ERS, FL 339* e named entity e of Florida.  RE:  Electro  mpaign Financir  S AND DIRECT  DP ( MOORE, LANI 445 KEENAN FT. MYERS, F	SE 17 submits this statement for the p nic Signature of Registered Age of Trust Fund Contribution ( ). CTORS: ) Delete NY W., AVENUE L 33919 ) Delete //LLIAM P., NEAD LANE	ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LANNY W. MOORE DP 04/27/2004