2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2004 8:00 am
Secretary of State
04-06-2004 90020 018 ****70.00

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1. Entity Name
EXSULTATE! INC.

Principal Place of Business	Mailing Address
C/O DON WALKER 222 SOUTHAMPTON LN VENICE, FL 34293	EXSULTATE! BOX 394 VENICE, FL 34284

04012004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
101 West Venice Ave.	
Suite, Apt. #, etc. Suite 31-5	Suite, Apt. #, etc.
City & State Venice, Florida	City & State
Zip 34285 Country US	Zip Country

4. FEI Number
75-3036470
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CRUSINBERRY, TOM
465 E RUBENS DR
NOKOMIS, FL 34275

7. Name and Address of New Registered Agent

Name
Janet Roberts
Street Address (P.O. Box Number is Not Acceptable)
101 West Venice Ave
Suite 31-5
City
Venice
FL
Zip Code
34285

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 Janet Roberts, Treasurer Janet Roberts 4/1/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP CRUSINBERRY, TOM 465 E RUBENS DR NOKOMIS, FL 34275	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director - President Michael Hartley DKE, Inc 101 West Venice Ave., Suite 10 Venice, FL 34285	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS BRUCE, PAT 1222 CAPRI ISLE BLVD VENICE, FL 342924456	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Carol Petterson, Secretary/Director 708 South Tamiami Trail, #103 Venice, Florida 34285	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT ROBERTS, JANET 1283 FLYING BRIDGE LN OSPREY, FL 34229	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director - Vice President Jean - Trammell 418 Gulf St. Venice Florida 34285	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WALKER, DON 222 SOUTHAMPTON LN VENICE, FL 34293	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Martha Jarrett 718 Golden Beach Blvd., Unit 10 Venice, Florida 34285	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHEPPARD, ELISE 1065 SCHOONER LN ENGLEWOOD, FL 34224	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Thomas Davis 999 Inlet Circle, A204 Venice, Florida 34285	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRUCE, ROBERT 1222 COPRI ISLE BLVD VENICE, FL 34292	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Janet Roberts Janet Roberts D+T 4/1/04 941-966-2979
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #