

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2004 8:00 am
Secretary of State

09-02-2004 90072 029 ****61.25

DOCUMENT # N35416

1. Entity Name
F.E.A.S.T., INC.



Principal Place of Business
32756 US 19 N
PALM HARBOR, FL 34684 US

Mailing Address
P.O. BOX 2154
PALM HARBOR, FL 34682 US

2. Principal Place of Business
32764 US 19 N

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

08302004 Chg-NP

CR2E037 (10/03)

City & State
PALM HARBOR

City & State

4. FEI Number
59-2981961

Applied For
Not Applicable

Zip
34684

Country
USA

Zip

Country

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

6. Name and Address of Current Registered Agent

KRATZ, JAMES
32756 US 19 N
PALM HARBOR, FL 34684

7. Name and Address of New Registered Agent

Name: WALTER A ANDERSON
Street Address (P.O. Box Number is Not Acceptable): 2380 WORLD PKWY BLVD #34
City: CLEARWATER FL Zip Code: 33763

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: *Walter A. Anderson* 8-30-04
(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by September 8, 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

TITLE	PD	☒ Delete
NAME	KRATZ, JAMES	
STREET ADDRESS	8148 BRUNSWICK CIRCLE	
CITY-ST-ZIP	PALM HARBOR, FL 34684	
TITLE	VPD	☐ Delete
NAME	WALTER, ANDERSON	
STREET ADDRESS	2380 WORLD PKWY #34	
CITY-ST-ZIP	CLEARWATER, FL 33763	
TITLE	D	☐ Delete
NAME	VAN VOORST, HAROLD	
STREET ADDRESS	1763 MAIN STREET APT 103A	
CITY-ST-ZIP	DUNEDIN, FL 34689	
TITLE	D	☐ Delete
NAME	STANEK, DOROTHY	
STREET ADDRESS	4158 CHESTERFIELD CIRCLE	
CITY-ST-ZIP	PALM HARBOR, FL 34683	
TITLE	DVP	☐ Delete
NAME	KRATZ, JAMES	
STREET ADDRESS	8148 BRUNSWICK CIRCLE	
CITY-ST-ZIP	PALM HARBOR, FL 34684	
TITLE	D	☒ Delete
NAME	HEBBELER, KATHERINE	
STREET ADDRESS	821 PARK CT	
CITY-ST-ZIP	PALM HARBOR, FL 34685	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☒ Addition
NAME	FORREST VAN VOORST	
STREET ADDRESS	321 ARISTOTLE ST	
CITY-ST-ZIP	DUNEDIN, FL 34698	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SEC	☐ Change ☒ Addition
NAME	JOSEPHINE ADAMSKI	
STREET ADDRESS	608 BETMOR LANE	
CITY-ST-ZIP	ORONA, FL 34660	

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: *Walter A. Anderson* 8-30-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #