

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000024590

Entity Name: 1087 BENEVA TOWER, INC.

FILED
Mar 26, 2004
Secretary of State

Current Principal Place of Business:

678 MOURNING DOVE DR
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

678 MOURNING DOVE DR
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 65-1081724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WEEKS, ROBERT M
678 MOURNING DOVE DR
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHIDE, RONALD
Address: 2450 AIRPORT RD G363
City-St-Zip: LONGMONT, CO 80503

Title: SD () Delete
Name: WEEKS, ROBERT
Address: 678 MOURNING DOVE DR
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CRIDER, RONALD E
Address: 2450 AIRPORT RD G363
City-St-Zip: LONGMONT, CO 80503

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RONALD E CRIDER

PD

03/26/2004

Electronic Signature of Signing Officer or Director

_____ Date