2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000107329

Entity Name: JO ANN FENSTERMACHER, INC.

FILED Jan 18, 2004 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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1517 PLEASANT GROVE DR 1901 WEST BAY DRIVE DUNEDIN, FL 346982341 SUITE 18

SUITE 18 LARGO, FL 337703015 US

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Current Mailing Address: New Mailing Address:

1517 PLEASANT GROVE DR
DUNEDIN, FL 346982341

1517 PLEASANT GROVE DR
DUNEDIN, FL 346982341 US

FEI Number: 81-0576734 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FENSTERMAKER, JOAN G 1517 PLEASANT GROVE DR DUNEDIN, FL 346982341 CANALES, TRACY N MRS 212 LIMONA DRIVE BRANDON, FL 335104198 US

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: MRS. TRACY N. CANALES 01/18/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: P (X) Change () Addition
Name: FENSTERMACHER, JO ANN LMT RFS Name: FENSTERMACHER, JO ANN LMT RFS

 Address:
 1517 PLEASANT GROVE DR
 Address:
 1517 PLEASANT GROVE DR

 City-St-Zip:
 DUNEDIN, FL 346982341
 City-St-Zip:
 DUNEDIN, FL 346982341

 Title:
 () Delete
 Title:
 V () Change (X) Addition

 Name:
 Name:
 FENSTERMAKER, JOAN G

 Address:
 Address:
 1517 PLEASANT GROVE DRIVE

 City-St-Zip:
 City-St-Zip:
 DUNEDIN, FL 346982341 US

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: JO ANN FENSTERMACHER P 01/18/2004