## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 08, 2004 8:00 am Secretary of State DOCUMENT # P96000050713 1. Entity Name 04-08-2004 90029 028 \*\*\*163.75 GHETT CLAYED, INC. Principal Place of Business Mailing Address 1195 CLAYS TRAIL PO BOX 1027 OLDSMAR FL 34677 US **DUNNELLON FL 34430-1022** 94047434 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) P.O. BOX 102 City & State 4. FEI Number Applied For 59-3390997 Dunnellow, Florida Not Applicable Country US# \$8.75 Additional 5. Certificate of Status Desired 34430-1027 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JEORGE, ERIC T Street Address (P.O. Box Number is Not Acceptable) 101 E KÉNNEDY BLVD STE 2700 **TAMPA FL 33602** City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. TITLE ☐ Delete TITLE ☐ Addition TAYLOR, ERIC JR NAME NAME STREET ADDRESS 20930 RIVER DR. STREET ADDRESS CITY-ST-ZIP **DUNNELLON FL 34431** CITY-ST-ZIP STD mt€ ☐ Delete TITLE ☐ Change ☐ Addition NAME TAYLOR, SUSAN B NAME 20930 RIVER DR STREET ADDRESS STREET ADDRESS **DUNNELLON FL 34431** CITY-ST-7IP CITY ST ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME TAYLOR, JE NAME STREET ADDRESS 101 E KENNEDY BLVD STE 2700 STREET ADDRESS CITY-ST-ZIP **TAMPA FL 33602** CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition TAYLOR, JOY E NAME NAME 2501 LYNBROOK DR STREET ADDRESS STREET ADDRESS YARDLEY PA 19067 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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J, Evic Thylor, JR. 100. 352-489-3/08 GNATURE AND TYPED OF PRINTED YAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

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 607, 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.