


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2004 8:00 am
Secretary of State

05-14-2004 90009 027 ***150.00

DOCUMENT # P01000120183

1. Entity Name
 100 CENTRAL, INC.



Principal Place of Business
 100 E CENTRAL BLVD
 ORLANDO, FL 32801

Mailing Address
 100 E CENTRAL BLVD
 ORLANDO, FL 32801

54054515



03292004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 01-0580722 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

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

6. Name and Address of Current Registered Agent

MARLOW, TOM A
 106 N SUMMERLIN AVE
 ORLANDO, FL 32801

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

| 10. OFFICERS AND DIRECTORS | |
|---|---|
| TITLE* NAME STREET ADDRESS CITY - ST - ZIP | D MARKU, TOM A 106 N. SUMMERLIN AVE. ORLANDO, FL 32801 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D MAURO, MICHAEL S SR 625 PALMER ST. ORLANDO, FL 32801 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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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.

SIGNATURE: Tom Marlow Date: 4-13-04 Daytime Phone #: 407-393-7297