

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 257057

FILED  
Jan 26, 2004  
Secretary of State

Entity Name: THE PACKERS OF INDIAN RIVER, INC.

**Current Principal Place of Business:**

2202 12TH AVE.  
VERO BCH., FL 329605311

**New Principal Place of Business:**

5700 W MIDWAY ROAD  
FORT PIERCE, FL 34981

**Current Mailing Address:**

P.O. BOX 12969  
FT. PIERCE, FL 349792969 US

**New Mailing Address:**

FEI Number: 59-0953527      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ROGERS, JAMES L  
5700 W MIDWAY ROAD  
FT. PIERCE, FL 34981 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: STD ( ) Delete  
Name: ROGERS, JAMES L. III,  
Address: 200 COCONUT PALM RD.  
City-St-Zip: VERO BCH., FL 32963 US

Title: D ( ) Delete  
Name: JOHNSON, SUE ROGERS,  
Address: 7380 WILDERCLIFF DR.  
City-St-Zip: ATLANTA, GA 30328 US

Title: PD ( ) Delete  
Name: GARAVAGLIA, MICHAEL J JR  
Address: 1617 W. SANDPOINTE PL.  
City-St-Zip: VERO BEACH, FL 32963

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

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

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

Title: PD (X) Change ( ) Addition  
Name: GARAVAGLIA, MICHAEL J JR  
Address: 1840 TARPON LN 106D  
City-St-Zip: VERO BEACH, FL 32960

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: MICHAEL GARAVAGLIA

P

01/26/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date