~2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #311887

1. Entity Name SPRINGROSE INC



FILED Feb 09, 2004 08:00 AM Secretary of State

Principal Place of Business

979 FLAMEVINE LANE VERO BEACH FLA, 32963 Mailing Address 979 FLAMEVINE LANE VERO BEACH, FL 32963



DO NOT WRITE IN THIS SPACE 01292004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-1222622

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

FROEHLICH, PETER G. 2976 59TH AVE VERO BEACH, FL 32966

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the poons of registered agent	turpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable, (NOTE, Registered	i Agent signature	required when reinstating)	DATE	
File NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Finan Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS .				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FROEHLICH, PETER G. 2976 59TH AVE VERO BEACH, FL 32966			U00000044575 02/11/04-80025-018 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SPRINGER, JACQUELINE E 999 FLAMEVINE LANE VERO BEACH, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FROEHLICH, MARILYN 2976 59TH AVE VERO BEACH, FL 32966			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSE, EDWARD L. JR. 969 FLAMEVINE AVE. VERO BEACH, FL 32963		IN THIS SPACE			
TITLE NAME STREET ADDRESS CRY-ST-ZIP	D ROSE, MITZI 969 FLAMEVINE LANE VERO BEACH, FL 32963					
TITLE NAME STREET ADDRESS GRY-ST-ZIP	1					
40 Charabara	andia, that the information arounding with this f	lline does not muslifu for the own	matica etata	dia Saction 110 07/91	Vi) Floride Statutes I further certify that the information	

12. Thereby 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 cath, 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:

STUTE TO TROCKLES PETER G. FROEHLICH

2/6/04

112-231-4755

Daytime Phone #