FILED Feb 09, 2004 8:00 am Secretary of State

2004	FOR	PROFIT	CORPOR	ATION
	Α	NNUAL	REPORT	

1. Entity Nam	MEN I # 369967 TIC OF CENTRAL FLORIDA	02-09-200	4 90038 006 ***150.00		
Principal Plac	e of Business	Mailing Address			
2716 FORSY	TH RD	2716 FORSYTH RD	•		•
101		101			
WINTER PAR	K, FL 32792	WINTER PARK, FL 3279	92	E INGLER HITTO OLEAN CRITTO IN THE OTHER PRINTERS	III BEBIT BIBIT BIBIT BEBIT BEBET BIBETBAN IL 1800
2. Principal Place of Business 3.		3. Mailing Address			
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Suite, Apt. #, etc.		Suite, Apt. #, etc.		01132004 Chg-P	CR2E034 (10/03)
City & State		City & State	City & State		Applied For Not Applicable
Zip	Country	Zip	Country	59-1303309 5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current I	 Registered Agent		7. Name and Address of New	
			Name		
	I, KIMBERLEY		Street Address	(P.O. Box Number is Not Acceptab	do)
2716 FOR STE 101	orinku		Street Address	(r.o. box ryumber is Not Acceptab	······································
	PARK, FL 32792				
	,		City		Zip Code
0 Th. :					FL
the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its	egistered office or registe	red agent, or both, in the State of F	lorida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	Registered Agent signature require	d when reinstating)	DATE
					**** *********************************
+ FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0	9. Election Campaig Trust Fund Contri		i.00 May Be ded to Fees	
10.	OFFICERS AND I		11.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 11
TITLE NAME	CPD SULLIVAN, JERRY F	☐ Delete	TITLE		Change Addition
STREET ADDRESS	2716 FORSYTH RD STE 101		NAME STREET ADDRESS		•
CITY-ST-ZIP	WINTER PARK, FL 32792		CITY-ST-ZIP		
TITLE	VDS	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	SULLIVAN-TODD, KIMBERLEY		NAME		_ , _
STREET ADDRESS	2716 FORSYTH RD STE 101		STREET ADDRESS	•	ļ
CITY-ST-ZIP	WINTER PARK, FL 32792		CITY-ST-ZIP		
TITLE - NAME	D -SULLIVAN-JERRY-F	☐ Delete	TITLE	1 11 an an an an	Change Addition
STREET ADDRESS	,		STREET ADDRESS		-
CITY-ST-ZIP	WINTER PARK, FL 32792		CITY-ST-ZIP		
TITLE	Т .	☐ Delete	TITLE .	*8	☐ Change ☐ Addition
NAME	SULLIVAN, PATRICK		NAME	e e	
STREET ADDRESS CITY-ST-ZIP	2716 FORSYTH RD STE 101		STREET ADDRESS		
	WINTER PARK, FL 32792		CiTY-ST-ZIP		
TITLE NAME		☐ Delete	TITLE		☐ Change ☐ Addition
STREET ADDRESS			NAME STREET ADDRESS		
CITY-ST-ZIP			CITY-SI-ZIP		
TITLE		☐ Delete	TITLE		Change Addition (
NAME -			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP		ALC: PP	CITY-ST-ZIP		
indicated	certify that the information eapplied with on this report of superemental report is poration or the reserver or trudee empor , or on an attachment with an address, w	this filing does not qualify for true and accurate and that m	the exemption stated in Se y signature shall have the	ection 119.07(3)(i), Florida Statutes. same legal effect as if made under	. I further certify that the information oath; that I am an officer or director
of the cor changed,	poration or the regeiver or trustee empor , or on an attachment with an address, w	wered to execute this report a rith all other like empowered.	is required by Chapter 60	7, Florida Statutes; and that my nan	ne appears in Block 10 or Block 11 if
		1	1/ 1 1	VILLE TIM	1 alabah
SIGNAT	URE: WYLLLUG	WOOD_	KILLDEY HELL	Ullian - Dole	× 2/4/04
	SIGNATURE AND TYPED OR PR	RINTED NAME OF SIGNING OFFICER O	R DIRECTOR \	Date	Daytime Phone #*
				1	~ (~)