

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004 8:00 am
Secretary of State

07-12-2004 90017 011 ***150.00

DOCUMENT # 373407



1. Entity Name
CORPORATE PROGRAMMING OF FLORIDA, INC.

Principal Place of Business
6511 TIMBER LANE
BOCA RATON, FL 33433

Mailing Address
6511 TIMBER LANE
BOCA RATON, FL 33433

44048040



2. Principal Place of Business
1489 W Palmetto Park Rd
Suite, Apt. #, etc.
445

3. Mailing Address
Suite, Apt. #, etc.

07022004 Chg-P CR2E034 (10/03)

City & State
BOCA RATON FL

City & State

4. FEI Number
59-1308170

Applied For
Not Applicable

Zip
33486 FL

Country
Palm Beach

Zip Country

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

6. Name and Address of Current Registered Agent

MARKS, LANNY K
6511 TIMBER LANE
BOCA RATON, FL 33433

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP
MARKS, RICHARD L
21676 WESSEX WAY
BOCA RATON, FL 33486

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PS
MARKS, RENEE T
21676 WESSEX WAY
BOCA RATON, FL 33486

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP
MARKS, LANNY K
6511 TIMBER LANE
BOCA RATON, FL 33433

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
MASON, NICOLE
6511 TIMBER LANE
BOCA RATON, FL 33433

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1
18704 Ocean Mist Dr
BOCA RATON, FL 33498

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

18704 Ocean Mist Dr
BOCA RATON, FL 33498

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

9857 PALMA Vista Way
BOCA RATON, FL 33426

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lanny K. Marks, VP

Date

7/7/04

Daytime Phone #

561-750-0312