


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # 459464 1. Entity Name LONG'S GIFT SHOP, INC.	
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Principal Place of Business 700 FIRST STREET SOUTH WINTER HAVEN, FL 33880-3605 US	Mailing Address 700 FIRST STREET SOUTH WINTER HAVEN, FL 33880-3605 US
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DO NOT WRITE IN THIS SPACE



04152004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1568555	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional
Fes Required**

6. Name and Address of Current Registered Agent

LENHART, DENNIS W.
427 CORNWALL RD.
WINTER PARK, FL 32792

**DO NOT WRITE
IN THIS SPACE**

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. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000120239 04/19/04-80125-006 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LONG, GEORGE A IV 85 LAKE OTIS ROAD WINTER HAVEN, FL 33884
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LONG, CHRISSANNE 85 LAKE OTIS ROAD WINTER HAVEN, FL 33884
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LONG, GEORGE A. III 85 LAKE OTIS ROAD WINTER HAVEN, FL 33884
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST LOY, ELIZABETH J. 431 MAPLETREE DRIVE #208 ALTOONA, FL 327029026
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SHURMAN, MICHELE 615 S SADDLE CREEK FARM RD LAKELAND, FL 33801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Michele Shurman 4/15/04 813-293-3335