

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 635518

Entity Name: RAE G. KISER INC.

FILED  
Feb 09, 2004  
Secretary of State

## Current Principal Place of Business:

7 BUCKHEAD RIDGE RD  
OKEECHOBEE, FL 34974 US

## New Principal Place of Business:

## Current Mailing Address:

671 SW 6 ST  
V.T. #401  
POMPANO BEACH, FL 33060 US

## New Mailing Address:

671 LAKESIDE CIRCLE  
671 SW 6 ST  
V.T. #401  
POMPANO BEACH, FL 33060 US

FEI Number: 59-1957395

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KISER, RAE G.  
671 SW 7 ST  
V.T. #401  
POMPANO BEACH, FL 33060 US

## Name and Address of New Registered Agent:

KISER, RAE G.  
671 LAKESIDE CIRCLE SW 7 ST  
V.T. #401  
POMPANO BEACH, FL 33060 US

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:

02/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: KISER, RAE G,  
Address: 671 SW 6 ST V.T #401  
City-St-Zip: POMPANO BEACH, FL 33060

Title: ST (X) Delete  
Name: PEARCE, LYNN H  
Address: 7 BUCKHEAD RIDGE ACCESS RD  
City-St-Zip: OKEECHOBEE, FL 34974

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: KISER, RAE G,  
Address: 671 LAKESIDE CIRCLE, V.T #401  
City-St-Zip: POMPANO BEACH, FL 33060

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

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: RAE G. KISER

PT

02/09/2004

Electronic Signature of Signing Officer or Director

Date