FILED
Apr 05, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 645692

1. Entity Name
THE SILVER QUEEN, INC.

Principal Place of Business	Mailing Address
1350 WEST BAY DR LARGO, FL 33770 US	1350 WEST BAY DR LARGO, FL 33770 US

DO NOT WRITE IN THIS SPACE

03192004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1947693
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ARBUTINE, PATRICIA L.
1350 WEST BAY DR
LARGO, FL 33770

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000103306
04/05/04-80050-023 150.00

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	ARBUTINE, PATRICIA L.
STREET ADDRESS	1350 WEST BAY DRIVE
CITY-ST-ZIP	LARGO, FL 33770
TITLE	VP
NAME	ARBUTINE, MILLER B.
STREET ADDRESS	1350 WEST BAY DRIVE
CITY-ST-ZIP	LARGO, FL 33770
TITLE	P
NAME	ARBUTINE, GREGORY M.
STREET ADDRESS	1350 WEST BAY DR
CITY-ST-ZIP	LARGO, FL 33770
TITLE	S
NAME	ARBUTINE, CHRISTOPHER S.
STREET ADDRESS	1350 WEST BAY DRIVE
CITY-ST-ZIP	LARGO, FL 33770
TITLE	T
NAME	ARBUTINE, JAYSON B
STREET ADDRESS	1350 WEST BAY DRIVE
CITY-ST-ZIP	LARGO, FL 33770
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Patricia L. Arbutine 4/4/04 727-581-6827
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Patricia L. Arbutine

eft 40008