

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 647417

FILED
Apr 28, 2004
Secretary of State

Entity Name: TRADITIONAL WATERCRAFT, INC.

Current Principal Place of Business:

1979 WILD ACRES ROAD
LARGO, FL 33771 US

New Principal Place of Business:

Current Mailing Address:

1979 WILD ACRES ROAD
LARGO, FL 33771 US

New Mailing Address:

FEI Number: 59-1959797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, ROBERT K
280 BLUFF VIEW DR
LARGO, FL 33774 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOHNSON, ROBERT K,
Address: 280 BLUFF VIEW DR
City-St-Zip: LARGO, FL 337701305

Title: SD () Delete
Name: JOHNSON, JERI M,
Address: 280 BLUFF VIEW DR
City-St-Zip: LARGO, FL 337701305

Title: GM () Delete
Name: BLACKWELL, E B
Address: 7251 CHAMELEON WAY
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ROBERT K. JOHNSON

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date