2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 09, 2004 8:00 am Secretary of State **DOCUMENT # 756014** 1. Entity Name 04-09-2004 90059 044 ****61.25 THE POKE-A-DOTS, INC. Mailing Address Principal Place of Business % ALVIN BRUBAKER - BAYSHORE GARDENS 2074 SUNSET DR., BLDG. 7R APT. 32 BRADENTON FL 34207 8515 US HWY 41N 10202011 #106 PALMETTO FL 34221 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-2128754 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ى ئەخەرىتىنى ANDERSON, ELEANOR T Street Address (P.O. Box Number is Not Acceptable) E515 US HWY 41 N #106 PALMETTO FL 34221 Zio 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. 1 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) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change TITLE ☐ Delete TITLE ☐ Addition WALKER, DELORES NAME NAME 605 22ND ROAD E STREET ADDRESS STREET ADDRESS BRADENTON FL 34207 CITY-ST-ZIP CITY-ST-ZiP ☐ Delete ☐ Change ☐ Addition SARDO, J MARICE NAME NAME 5112 2ND AVE W STREET ADDRESS STREET ADDRESS BRADENTON FL 34209 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Addition TITLE ☐ Delete ANDERSON, ELEANOR NAME NAME 8515 U.S. HWY. 41 N., LOT 106 STREET ADDRESS STREET ADDRESS BRADENTON FL 34221 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE HALLORAN, BETTY J NAME NAME 4110 15TH AVE W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34205** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE POLLEY, RUBY W NAME NAME 910 ORLANDO AVENUE W STREET ADDRESS STREET ADDRESS BRADENTON FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE DAVIS, VIRGINIA NAME NAME 6306 7TH AVE W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34209** CITY-ST-ZIP CITY-ST-ZIP

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 617, 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.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

april 7, 04 (941) 723-9146

Daytime Phone #

FILED