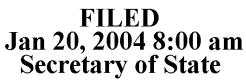
2004 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # 762598



Principal Place of Business % RALPH SARGEANT 232 N. MASSACHUSETTS AVENUE LAKELAND, FL 33801 2. Principal Place of Business \$ Mailing Address % RALPH SARGEANT 232 N. MASSACHUSETTS AVENUE LAKELAND, FL 33801 2. Principal Place of Business \$ J. Mailing Address \$ Suite, Apt. #, etc. \$ Suite, Ap
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. O1062004 Chg-NP CR2E037 (10/03) City & State Country Country Country S. Certificate of Status Desired Fee Required Fee Required WHEELER, BILL 1203 HEIDI LANE N Street Address (P.O. Box Number is Not Acceptable)
City & State Applied For Sep-2252271 Not Applied For Sep-2252271 State In Name and Address of New Registered Agent Name Sep-2252271 Street Address (P.O. Box Number is Not Acceptable)
Street Address (P.O. Box Number is Not Acceptable) Society S
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Name Street Address (P.O. Box Number is Not Acceptable)
WHEELER, BILL 1203 HEIDI LANE N Street Address (P.O. Box Number is Not Acceptable)
WHEELER, BILL 1203 HEIDI LANE N Street Address (P.O. Box Number is Not Acceptable)
1203 HEIDI LANE N Street Address (P.O. Box Number is Not Acceptable)
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City Zip Code
F- I
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 act 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) DATE
Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make check payable to Florida Department of State
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE CD Mange Ad
NAME HARDEN, RALPH
STREET ADDRESS 1221 MEADOWOOD STREET ADDRESS 5863 HIGHRIDGE LOOP
CITY-ST-ZIP LAKELAND, FL 33813
LHECOTO-, FC JJ613
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to accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if officer in the empowered.