2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 14, 2004 8:00 am Secretary of State 01-14-2004 90001 027 ****61.25

1. Entity Nar	MENT #764643 of pasco county, in	NC.			
Principal Place 12724 SMITI DADE CITY, F		Mailing Address PO BOX 928 DADE CITY, FL 33526	US	94001975	,
2. Principal F	Place of Business	3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01052004 Chg-NP CR2E037 (10/03	3)
City & State		City & State		E0 2204440 TT	Applied For Not Applicable
Zip		Zip	Country	5. Certificate or Status Desired LT Fee Requ	Additional uired
	6. Name and Address of Current	Registered Agent	None	7. Name and Address of New Registered Agent	
IVIE, ALFRED J JR. 38100 MERIDIAN AVE. DADE CITY, FL 33525			Name Atty. Hutch Brock Street Address (P.O. Box Number is Not Acceptable)		
ē			City	137 Mericlian Ane Te City FL 333	ode 52 <i>5</i>
*8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or though state of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature. Typic or primed from of registered agent and title if applicable. (NOTE: Registered Agent signature requireds: signature requi					
	7 7				
	Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campa Trust Fund Co	aign Financing	\$5.00 May Be Added to Fees Florida Department of	State
10.	Filing Fee is \$61.25 Due by May 1, 2004 OFFICERS AND DIF	9. Election Campa Trust Fund Co	aign Financing ntribution.	\$5.00 May Be Added to Fees Plotical Department of ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR.	State S IN 10
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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 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 officion of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes any name appears in Block 10 or Block 11 changed, or on an attactment with an address, with all the file empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

1352 567-6581