

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002175

FILED
Feb 11, 2004
Secretary of State

Entity Name: ACTION PARK ALLIANCE, INC.

Current Principal Place of Business:

15131 CLARK AVENUE
CITY OF INDUSTRY, CA 91745

New Principal Place of Business:

Current Mailing Address:

15131 CLARK AVENUE
CITY OF INDUSTRY, CA 91745

New Mailing Address:

FEI Number: 47-0857891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAAS, KEVIN
1201 WATERVIEW CIRCLE
PALM SPRINGS, FL 33461 US

Name and Address of New Registered Agent:

KRAAS, KEVIN
400 FESTIVAL WAY
ORLANDO, FL 32803 US

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: KEVIN KRAAS

02/11/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: SPOHN, AARON
Address: 6501 W. 84TH ST.
City-St-Zip: LOS ANGELES, CA 90045

Title: WVC () Delete
Name: SPOHN, DAMON
Address: 6130 W. 76TH ST.
City-St-Zip: LOS ANGELES, CA 90045

Title: S () Delete
Name: LEE, ERIC
Address: 10422 SANDE ST.
City-St-Zip: CYPRESS, CA 90630

Title: T () Delete
Name: BRADFORD, KIRSTEN
Address: 6130 W. 76TH ST.
City-St-Zip: LOS ANGELES, CA 90045

Title: D () Delete
Name: BRADFORD, MARK
Address: 8319 GONZAGA AVE.
City-St-Zip: LOS ANGELES, CA 90045

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: BRADFORD, KIRSTEN
Address: 6130 W. 76TH ST.
City-St-Zip: LOS ANGELES, CA 90045

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: KIRSTEN BRADFORD

T

02/11/2004

Electronic Signature of Signing Officer or Director

Date