2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Jul 21, 2004 8:00 am Secretary of State

DOCUMENT # F0300005584 1. Entity Name				Secretary of State 07-21-2004 90021 007 ***550.00	
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Principal Plac	pe of Business	Mailing Address			
1736 DEFOOR PLACE N.W. ATLANTA GA-30318				54063994	
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2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		6.32 A. #		- 1 I SERIKS 1911 ODKOG (1911 ODKO TOLI) OD (1) TOLI) OD (1) ERKER SOKE ISKNI ODGIDEN (1) 1921 - '	
		Suite. Apt. #, etc.		MOORE CR2E034 (11/03)	
City & Stat	te	City & State		4. FEI Number 58-1354244 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current	t Registered Agent	Nome	7. Name and Address of New Registered Agent	
RIC	HARDSON LESTER F		Name		
RICHARDSON, LESTER F 525 NORTH CARROLL ROAD LAKELAND FL 33801			Street Addres	s (P.O. Box Number is Not Acceptable)	
	∮ □				
	i.		City .	FL Zip Code	
the obligation	enamed entity submits this statement for tions of registered agent.	or the purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE	E: Redistered Agent signature requ	1	
	ILE NOW!!! FEE IS \$150.00	- 100 - 100 ACE	7.75		
After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.	OCCIOCOS INTE	The state of the s		<u>!</u>	
		DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
NAME	CP	DIRECTORS Delete	TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
NAME STREET ADDRESS	CP GARDNER, JAN 1736 DEFOOR PLACE N.W.	· · · · · · · · · · · · · · · · · · ·			
NAME STREET ADDRESS CITY-ST-ZIP	CP GARDNER, JAN 1736 DEFOOR PLACE N.W. ATLANTA GA 30318	☐ Delete	TITLE NAME		
NAME STREET ADDRESS CITY-ST-ZIP TITLE	CP GARDNER, JAN 1736 DEFOOR PLACE N.W. ATLANTA GA 30318 VCST	· · · · · · · · · · · · · · · · · · ·	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		
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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 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 607, 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.

SIGNATURE:

on E. John

July 16,2004

351-2074