

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92038

FILED
Jan 07, 2004
Secretary of State

Entity Name: RALPH CURTIS PUBLISHING, INC.

Current Principal Place of Business:

16956 MCGREGOR BLVD
#6
FT MYERS, FL 33908 US

Current Mailing Address:

P O BOX 349
SANIBEL, FL 339570349 US

New Principal Place of Business:

16956 MCGREGOR BLVD
#9
FT MYERS, FL 33908 US

New Mailing Address:

FEI Number: 59-2238480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURTIS, RALPH
459 LAGOON DR
SANIBEL, FL 33957

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CURTIS, RALPH,
Address: 459 LAGOON DR
City-St-Zip: SANIBEL, FL

Title: STD () Delete
Name: CURTIS, BILLYE J,
Address: 459 LAGOON DR
City-St-Zip: SANIBEL, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CURTIS, RALPH C
Address: 459 LAGOON DR
City-St-Zip: SANIBEL, FL

Title: STD (X) Change () Addition
Name: CURTIS, BILLYE J
Address: 459 LAGOON DR
City-St-Zip: SANIBEL, FL

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: BILLYE J. CURTIS

STD

01/07/2004

Electronic Signature of Signing Officer or Director

Date