


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90035 013 ****61.25

DOCUMENT # F99000001317
 1. Entity Name
FAMILY ALTAR OF THE AIR, INCORPORATED



Principal Place of Business Mailing Address
 7500 ULMERTON RD #5 7500 ULMERTON RD #5
 LARGO, FL 33771 LARGO, FL 33771

J4UJJJ00


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04192004 No Chg-NP CR2E037 (10/03)

4. FEI Number 38-2381534	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 PRICE, D. BURDETTE REV
 7500 ULMERTON RD #5
 LARGO, FL 33771



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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 accept the obligations of registered agent.

SIGNATURE: D. BURDETTE PRICE, PRES. 4.17.04
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
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PRICE, D. BURDETTE 7500 ULMERTON RD #5 LARGO, FL 33771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PRICE, DONALD B 7500 ULMERTON RD #5 LARGO, FL 33771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PRICE, KELLY 7500 ULMERTON RD #5 LARGO, FL 33771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 617, 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: D. Burdette Price D. BURDETTE PRICE, Pres. 4.17.04 727.539.7939
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #