


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 14, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J45400</b> 1. Entity Name <b>CAPE SCOOTER AND MOWER CENTER INC.</b>	
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Principal Place of Business <b>% RAYMOND GERVAIS 820 CAPE CORAL PKWY.,E. CAPE CORAL, FL 33904</b>	Mailing Address <b>% RAYMOND GERVAIS 820 CAPE CORAL PKWY.,E. CAPE CORAL, FL 33904</b>
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01162004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-2753350</b>	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

<b>6. Name and Address of Current Registered Agent</b>  <b>GERVAIS, RAYMOND 820 CAPE CORAL PKWY. CAPE CORAL, FL</b>
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**DO NOT WRITE  
IN THIS SPACE**

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 Raymond C. Gervais RAYMOND C. GERVAIS Pres. 1-28-04  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

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

1000000112201  
04/14/04-80012-013 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GERVAIS, RAYMOND C. 4520 S.E. 14TH PLACE CAPE CORAL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GERVAIS, JEANNE B. 4520 S.E. 14TH PLACE CAPE CORAL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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: Raymond C. Gervais RAYMOND C. GERVAIS Pres. 1-28-04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

239-542-3859