

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J48934

FILED  
Feb 18, 2004  
Secretary of State

Entity Name: HOOTERS III, INC.

## Current Principal Place of Business:

26133 US HWY 19 N  
SUITE 100  
CLEARWATER, FL 346232019 US

## Current Mailing Address:

26133 US HWY 19 N  
SUITE 100  
CLEARWATER, FL 346232019 US

## New Principal Place of Business:

26133 US HWY 19 N  
SUITE 100  
CLEARWATER, FL 33763 US

## New Mailing Address:

26133 US HWY 19 N  
SUITE 100  
CLEARWATER, FL 33763 US

FEI Number: 59-2766891

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KEIFER, NEIL  
26133 US HWY 19 N  
SUITE 100  
CLEARWATER, FL 34623 US

## Name and Address of New Registered Agent:

KEIFER, NEIL  
26133 US HWY 19 N  
SUITE 100  
CLEARWATER, FL 33763 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:

02/18/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KIEFER, NEIL G  
Address: 7296 BRYCE POINT  
City-St-Zip: PINELLAS PARK, FL 33782

Title: DVP ( ) Delete  
Name: DIGIANNANTONIO, GILBERT  
Address: 3717 WOODRIDGE PLACE  
City-St-Zip: PALM HARBOR, FL

Title: DST ( ) Delete  
Name: RANFIERI, WILLIAM  
Address: 949 SKYE LANE  
City-St-Zip: PALM HARBOR, FL 34680

Title: D ( ) Delete  
Name: DROSTE, EDWARD C  
Address: 20 MIDWAY ISLAND  
City-St-Zip: CLEARWATER, FL 33767

Title: D ( ) Delete  
Name: JOHNSON, DENNIS  
Address: 277 ABERDEEN ST  
City-St-Zip: DUNEDIN, FL 34698

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: NEIL G. KIEFER

PD

02/18/2004

Electronic Signature of Signing Officer or Director

Date