

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J65935

Entity Name: FUN CASTLE, INC.

FILED
Feb 25, 2004
Secretary of State

Current Principal Place of Business:

2201 LANGLEY AVENUE
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

2201 LANGLEY AVENUE
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 59-2804965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEUCHTMAN, GARY B.
647 GERHARDT DRIVE
P. O. BOX 12950
PENSACOLA, FL 32503

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: TAYLOR, MIKE,
Address: 3401 ARGYLE DR
City-St-Zip: PACE, FL

Title: TDS () Delete
Name: TAYLOR, DORA A.,
Address: 3401 ARGYLE DR
City-St-Zip: PACE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TAYLOR, MIKE,
Address: 4675 BALMORAL DRIVE
City-St-Zip: PENSACOLA, FL 32504

Title: TDS (X) Change () Addition
Name: TAYLOR, DORA A.,
Address: 107 DURID DRIVE
City-St-Zip: PENSACOLA, FL 32507

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: MICHAEL W. TAYLOR

PRES

02/25/2004

Electronic Signature of Signing Officer or Director

_____ Date