

06-18-2004 90001 033 ***150.00
J85442

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 JUN 23 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

54057893



06132004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0027223	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

KIRVIN, JAMES J III
7480 MONTE VERDE LANE
WEST PALM BEACH, FL 33412

**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

James J. Kirvin III

(NOTE: Registered Agent signature required when reappointing)

6/12/04
DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KIRVIN, JAMES J III
STREET ADDRESS	7480 MONTE VERDE LN
CITY-ST-ZIP	WEST PALM BEACH, FL 33412

TITLE	ST
NAME	KIRVIN, CATHRYN E
STREET ADDRESS	7480 MONTE VERDE LN
CITY-ST-ZIP	WEST PALM BEACH, FL 33412

TITLE	
NAME	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

6/12/04

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, for another like empowered.

SIGNATURE:

James J. Kirvin III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/12/04 521-775-1338