


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 01, 2004 08:00 AM
Secretary of State

DOCUMENT # K09325 1. Entity Name 8475, INC.	
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Principal Place of Business 3033 RIVIERA DR STE 201 NAPLES, FL 34103 US	Mailing Address 3033 RIVIERA DR STE. 201 NAPLES, FL 34103 US
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02202004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0016435	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 BUDD, DAVID G. 3033 RIVIERA DR. STE 201 NAPLES, FL 34103
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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: _____ (NOTE: Registered Agent signature required when registering) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000073049 03/02/04-80020-007 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD RUBIN, HARRY 3033 RIVIERA DR., STE. 201 NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RUBIN, BENJAMIN 3033 RIVIERA DR., STE. 201 NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS RUBIN, LINDA 3033 RIVIERA DR., STE. 201 NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BUDD, DAVID G 3033 RIVIERA DRIVE, STE 201 NAPLES, FL 34103
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)(f), 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: David G. Budd 2/26/04 (239) 263-7700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

DAVID G. BUDD, VICE PRESIDENT