


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 31, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # K24640</b>	
1. Entity Name <b>HANGING MOSS INDUSTRIAL PROPERTIES, INC.</b>	

Principal Place of Business <b>931 N. PENNSYLVANIA AVE. PO BOX 3446 WINTER PARK, FL 32790 US</b>	Mailing Address <b>931 N. PENNSYLVANIA AVE. PO BOX 3446 WINTER PARK, FL 32790 US</b>
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**DO NOT WRITE IN THIS SPACE**



03042004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-2891969</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**R. LANCE WALKER  
931 N. PENNSYLVANIA AVE.  
WINTER PARK, FL 32789**

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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>U000000099419 03/21/04-80004-011 150.00</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP WALKER, R. LANCE 931 N. PENNSYLVANIA AVE. WINTER PARK, FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DVS BECK, JOHN PO BOX 626 N/A WINTER PARK, FL</b>
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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:** R. Lance Walker **R. LANCE WALKER** **03-29-04** **407/645-0500**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #