2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K26186

FILED Feb 25, 2004 Secretary of State

Entity Name: MCMANUS SEAFOOD, INC. **Current Principal Place of Business: New Principal Place of Business:** 301 NORTH 25TH STREET FORT PIERCE, FL 34947 **Current Mailing Address: New Mailing Address:** 1811 S. 30TH STREET FORT PIERCE, FL 34947 FEI Number: 65-0067730 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MONTGOMERY-HAJDUCEK, A.E. 3539 APALACHEE PARKWAY SUITE 159 TALLAHASSEE, FL 32311 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PCFO () Delete Title: () Change () Addition MCMANUS, MARTHA Name: Name: 1811 SOUTH 30TH STREET Address: Address: City-St-Zip: FORT PIERCE, FL City-St-Zip: Title: Title: () Delete () Change () Addition Name: MCMANUS, BRANT Name: 1442 COPENHAVER RD. Address: Address: City-St-Zip: FORT PIERCE, FL City-St-Zip: Title: Title: (X) Delete () Change () Addition MCMANUS, MARGARET Name: Name: 275 EUCLID STREET Address: Address: City-St-Zip: FORT PIERCE, FL City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARTHA MCMANUS **PCEO** 02/25/2004

MONTGOMERY-HAJDUCEK, A.E.

3539 APALACHEE PKWY., #159

TALLAHASSEE, FL 32311

Name:

Address:

City-St-Zip: