## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # K91589

1. Entity Name

CITRUS MEADOWS DEVELOPMENT ASSOCIATES, INC.



**FILED** Apr 30, 2004 08:00 AM Secretary of State

Principal Place of Business

% SAM F. HARDEE 2216 64TH ST. CT. E. BRADENTON, FL 34208 Mailing Address

% SAM F. HARDEE 2216 64TH ST. CT. E. BRADENTON, FL 34208



04022004

No Chg-P

CR2E034 (10/03)

4. FE! Number 65-0129541

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARDEE, SAM F. 2216 64TH ST. CT. E. BRADENTON, FL 34208

SIGNATURE

## DO NOT WRITE

				IN I MIS 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 life if applicable (NOTE, Registered Agent signature required when renstating)  OATE						
FILE NOWILI FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			ing 🔲	\$5.00 May Be Added to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PD HARDEE, SAM F. 2216 64TH ST. CT. E. BRADENTON, FL	TORS				
NAME STREET ADDRESS CITY-ST-ZIP			-			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filling 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 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 attacriment with an address, with all other like empowered.

THE HATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR