

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K98021

FILED
Mar 16, 2004
Secretary of State

Entity Name: DAVE'S CLOSET & ACCESSORIES, INC.

Current Principal Place of Business:

856 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

856 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 65-0128952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WYNN, DAVID
856 CAPE CORAL PARKWAY
CAPE CORAL, FL 33914

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: WYNN, DAVID,
Address: 3603 PELICAN BLVD
City-St-Zip: CAPE CORAL, FL

Title: D () Delete
Name: WYNN, BRENDA,
Address: 3603 PELICAN BLVD
City-St-Zip: CAPE CORAL, FL

Title: T () Delete
Name: CLEM, KEVIN
Address: 4612 SW 13TH AVE.
City-St-Zip: CAPE CORAL, FL 33914

Title: S () Delete
Name: BATES, STEVE
Address: 3314 SW 5TH PLACE
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: BRENDA WYNN

D

03/16/2004

Electronic Signature of Signing Officer or Director

Date