2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business Mailing Address SECORTINEY COLOURS	3	
Principal Place of Business Mailing Address SECRETARY OF GTATE PO BOX 1861 PO BOX 1861 TALLAHASSEE, FL 32302-1861 SECRETARY OF GTATE TALLAHASSEE, FL 32302-1861 TALLAHASSEE, FL 32302-1861 TALLAHASSEE, FL 32302-1861 SECRETARY OF GTATE	ħ.	
2. Principal Place of Business 3. Mailing Address		
출 249 N: 15CN GREEN Bund Suite, Apt. #, etc. 04292004 Chg-NP CR2E037 (10/0	3)	
City & State City & State 4. FEI Number Tallahassec, FL 59-3628471	Applied For Not Applicable	
Zip Country Zip Country 5. Certificate of Status Desired \$8.75 3Z305 USA 5. Certificate of Status Desired \$8.75 Fee Req 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent	Additional uired	
Name		
JAMES, DANEIL L 910 SPLENDOR ROAD Street Address (P.O. Box Number is Not Acceptable)	s (P.O. Box Number is Not Acceptable)	
TALLAHASSEE, FL 32301 249 Wilson GREEN Blud.		
Iallahassee FL 3	2305	
B. 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		
Filing Fee is \$61.259. Election Campaign Financing\$5.00 May BeMake check payabDue by May 1, 2004Trust Fund Contribution.Added to FeesFlorida Department of		
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR TITLE T Delete TITLE Char		
TITLE T Delate TITLE Char NAME YOUNG, OTIS B NAME 2000357333222 STREET ADDRESS 8231 BALMORAL DRIVE STREET ADDRESS 05/07/0401019007 **61 CITY-ST-ZIP TALLAHASSEE, FL 32311 CITY-ST-ZIP	ge □ Addition .25	
TITLE T Delete TITLE TITLE Char NAME ZACHERY, PAMELA C NAME Char Char STREET ADDRESS 8367 GLENDALIN ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE, FL 32311 CITY-ST-ZIP	ge 🗋 Addition	
TITLE T Delete TITLE Char NAME MACK-FREEMAN, NIESHA R NAME Indexes Indexes STREET ADDRESS 17311 NW 32ND COURT STREET ADDRESS Indexes Indexes CITY-ST-ZIP MIAMI, FL 33056 CITY-ST-ZIP Indexes Indexes	ge 🔲 Addition	
TITLE P Delate TITLE Char NAME JAMES, DANIEL L NAME STREET ADDRESS 910-2 SPLENDOR ROAD STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32301 CITY-ST-ZIP	ige 🔲 Addition	
TITLE T Delete TITLE Char NAME PARRISH, ANTHONY A NAME Char STREET ADDRESS 503 PALM BEACH STREET STE 427 STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32310 CITY-ST-ZIP	ige 🗌 Addition	
TITLE S Delete TITLE Char NAME TONEY, TIKESHA NAME Char Char STREET ADDRESS 920 SOUTH LIPONA ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE, FL 32304 CITY-ST-ZIP	ge 🛄 Addition	
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 617, 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: <u>Signature and typed or PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</u> Date Date Dayling Phot	1-9581	