2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# N00337

Entity Name: FIGHTING INDIANS TIP OFF CLUB, INC.

Current Principal Place of Business:

P.O BOX 7032
VERO BEACH, FL 329617032 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 7032
VERO BEACH, FL 329617032 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

OESS, JOSEPH M
631 CYPRESS ROAD
VERO BCH, FL 32960 US

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

OFFICERS AND DIRECTORS:

Title:	TD	( ) Delete
Name:	OESS, JOSEPH M	
Address:	631 CYPRESS ROAD	
City-St-Zip:	VERO BEACH, FL	
Title:	SD	( ) Delete
Name:	HODGES, GINA	
Address:	181 14TH AVE	
City-St-Zip:	VERO BCH, FL	
Title:	PD	( ) Delete
Name:	HARWELL, BOB	
Address:	120 44TH TERRACE SW	
City-St-Zip:	VERO BCH, FL	

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:	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH M OESS TD 04/28/2004

Electronic Signature of Signing Officer or Director — Date