2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2004
Secretary of State

DOCUMENT# N01000007837

Entity Name: NATIONAL TEEN ANGLER'S INC.

Current Principal Place of Business:

1177 BAYSHORE DR.
#207
FT. PIERCE, FL 34949

New Principal Place of Business:

Current Mailing Address:

1177 BAYSHORE DR.
#207
FT. PIERCE, FL 34949

New Mailing Address:

FEI Number: 65-1151655 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERNETTI, AL J JR.
1177 BAYSHORE DR.
#207
FT. PIERCE, FL 34949

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: C/P ( ) Delete
Name: BERNETTI, AL J D
Address: 1177 BAYSHORE DR. #207
City-St-Zip: FT. PIERCE, FL 34949 US

Title: V./S ( ) Delete
Name: WOODLE, BETTY J D
Address: 6501 COTTAGE LANE
City-St-Zip: ST. CLOUD, FL 34771 US

Title: V/T ( ) Delete
Name: PRICE, NANCY L D
Address: 16361 DUBLIN CIRCLE # 104
City-St-Zip: FT. MYERS, FL 33908 US

Title: T (X) Delete
Name: MURCHEE, ROB TRUSTEE
Address: 1177 BAYSHORE DR. # 207
City-St-Zip: FT. PIERCE, FL 34949 US

Title: T (X) Delete
Name: LEECH, JOHN TRUSTEE
Address: 1177 BAYSHORE DR. # 207
City-St-Zip: FT. PIERCE, FL 34949 U.

Title: T (X) Delete
Name: KELLY, SUZANNE
Address: 7050 RANCHARD CT.
City-St-Zip: SAINT CLOUD, FL 34771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V/T (X) Change ( ) Addition
Name: KELLY, SUZANNE D
Address: 7050 RANCHERO CT.
City-St-Zip: ST. CLOUD, FL 34771 US

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: AL BERNETTI P 04/08/2004

Electronic Signature of Signing Officer or Director — Date