

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000693

FILED
Apr 17, 2004
Secretary of State**Entity Name:** ASSOCIATION OF CRUISE SHIP PASSENGERS INC.**Current Principal Place of Business:**4869 S.W. 75 AVE
SUITE C
MIAMI, FL 33155 US**New Principal Place of Business:**1025 FLAMEVINE LANE
VERO BEACH, FL 32963 US**Current Mailing Address:**4869 S.W. 75 AVE
SUITE C
MIAMI, FL 33155 US**New Mailing Address:**1025 FLAMEVINE LANE
VERO BAECH, FL 32963 US**FEI Number:** **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PARKER, SCOTT PRES.
4869 S W 75 AVE
SUITE C
MIAMI, FL 33155 US**Name and Address of New Registered Agent:**PARKER, SCOTT PRES.
1025 FLAMEVINE LANE
VERO BEACH, FL 32963 US

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: SCOTT PARKER

04/17/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: PARKER, SCOTT
Address: 4869 SW 75 AVE
City-St-Zip: MIAMI, FL 33155Title: VP () Delete
Name: PAYNE, NANCY
Address: 1025 FLAMEVINE LN
City-St-Zip: VERO BEACH, FL 32963Title: S () Delete
Name: PAYNE, REBECCA
Address: 601 FLAMEVINE LANE
City-St-Zip: VERO BEACH, FL 32963**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: PARKER, SCOTT
Address: 1025 FLAMEVINE LANE
City-St-Zip: VERO BEACH, FL 23963Title: () 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: SCOTT PARKER

P

04/17/2004

Electronic Signature of Signing Officer or Director

Date