


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 31, 2004 08:00 AM
Secretary of State

DOCUMENT # N02000003170 1. Entity Name SUN 'N FUN CHARITIES, INC.	
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Principal Place of Business 4175 MEDULLA ROAD LAKELAND, FL 33811	Mailing Address POST OFFICE BOX 7670 LAKELAND, FL 33807-7670
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DO NOT WRITE IN THIS SPACE



08302004 No Chg-NP CR2E037 (10/03)

4. FEI Number 03-0440092	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**WENDEL, JOHN F
5300 SOUTH FLORIDA AVENUE
LAKELAND, FL 33813**

**DO NOT WRITE
IN THIS SPACE**

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WENDEL, JOHN 5200 S FLORIDA AVE LAKELAND, FL 33813
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08/31/04-80001-022 61.25

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IN THIS SPACE**

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:  **JOHN F WENDEL PRESIDENT** 8/30/04 863-603-7730
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #