2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2004
Secretary of State

DOCUMENT# N02000004177

Entity Name: THE LAST WAVE, INC.

Current Principal Place of Business:

5100 ADANSON ST.
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

2036 36TH STREET
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 04-3700415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

G&L AGENT SERVICES, INC.
390 N. ORANGE AVENUE
SUITE 600
ORLANDO, FL 32801 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:	DIR	( ) Delete
Name:	MORGAN, DIANNA DIR.	
Address:	8284 TIBET BUTLER DRIVE	
City-St-Zip:	WINDERMERE, FL 34786	
Title:	DIR	( ) Delete
Name:	WATSON, TED DIR.	
Address:	1563 VICTORIA WAY	
City-St-Zip:	WINTER GARDEN, FL 34787	
Title:	DIR	( ) Delete
Name:	LEE, SHERRI DIR.	
Address:	423 S. KELLER ROAD	
City-St-Zip:	ORLANDO, FL 32810	
Title:	PRES	( ) Delete
Name:	TROLLINGER, SARA PRES.	
Address:	2036 36TH ST,	
City-St-Zip:	ORLANDO, FL 32809	
Title:	DIR	( ) Delete
Name:	CARTER, DARYL DIR.	
Address:	908 S. DELANEY AVE.	
City-St-Zip:	ORLANDO, FL 32806	
Title:	DIR	( ) Delete
Name:	DOUGLASS, JUDY DIR.	
Address:	10636 SPRING BUCK	
City-St-Zip:	ORLANDO, FL 32825	

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:	
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: SARA TROLLINGER PRES 07/28/2004

Electronic Signature of Signing Officer or Director — Date