2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2004
Secretary of State

DOCUMENT# N02000006119

Entity Name: TREASURE COAST BUSINESS LEAGUE, INC

Current Principal Place of Business:

2201 SE INDIAN STREET
SUITE A-1
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

2201 SE INDIAN STREET
SUITE A-1
STUART, FL 34997

New Mailing Address:

FEI Number: 30-0131001 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NINE/THIRTYSECONDS, USA, INC
2201 SE INDIAN STREET
SUITE A-1
STUART, FL 34997 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: D ( ) Delete
Name: BENTON, CHARLES J SR
Address: 5649 SE WINDSONG LANE UNIT 527
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete
Name: HOWARD, RV
Address: 9837 SO US HWY 1
City-St-Zip: PORT ST LUCIE, FL 34952

Title: D ( ) Delete
Name: BRENT, ERIC C
Address: 6 KNOWLES RD
City-St-Zip: STUART, FL 34994

Title: D ( ) Delete
Name: GAINEY, ELMIRA R
Address: 5320 STERLING CIRCLE
City-St-Zip: STUART, FL 34997

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:

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: CHARLES J. BENTON, SR DIR 03/30/2004

Electronic Signature of Signing Officer or Director Date