

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02910

Entity Name: CENTRE STREET COOKERY, INC.

FILED
Apr 26, 2004
Secretary of State

Current Principal Place of Business:

502 BROONE ST
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

502 BROONE ST
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 59-1981882

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, MARY AGNES
502 BROOM ST.
FERNANDINA BEACH, FL 32034 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: PD () Delete
Name: WHITE, MARY AGNES,
Address: 502 BROOME STREET
City-St-Zip: FERNANDINA BEACH, FL

Title: VD () Delete
Name: SCHRANTZ, MARIELLA B, .
Address: 6 ILLAN CIRCLE
City-St-Zip: FERNANDINA BEACH, FL

Title: SD () Delete
Name: MERZEJEWSKI, FLORENC, E
Address: 418 N 17TH ST
City-St-Zip: FERNANDINA BEACH, FL

Title: TD () Delete
Name: MOCK, MARCIA P.,
Address: 2008 HIGHLAND DR.
City-St-Zip: FERNANDINA BEACH, FL

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: MARCIA P. MOCK

TREA

04/26/2004

Electronic Signature of Signing Officer or Director

Date