

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004841

Entity Name: LADY EVERBLADES, INC.

FILED  
May 05, 2004  
Secretary of State

## Current Principal Place of Business:

7025 MILL RUN CIR  
NAPLES, FL 34109

## New Principal Place of Business:

## Current Mailing Address:

7025 MILL RUN CIR  
NAPLES, FL 34109

## New Mailing Address:

P O BOX 2323  
BONITA SPRINGS, FL 34133

FEI Number: 20-0936004

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HORNE, DENISE  
7025 MILL RUN CIR  
NAPLES, FL 34109

## Name and Address of New Registered Agent:

HORNE, DENISE  
3722 LUZON STREET  
FORT MYERS, FL 33901

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: DENISE HORNE

05/05/2004

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: TP ( ) Delete  
Name: HENRY, LARK R  
Address: P.O.BOX 2323  
City-St-Zip: BONITA SPRINGS, FL 34133

Title: TV ( ) Delete  
Name: MASNJAK, KARL  
Address: P.O.BOX 2323  
City-St-Zip: BONITA SPRINGS, FL 34133

Title: TT ( ) Delete  
Name: HORNE, DENISE  
Address: P.O.BOX 2323  
City-St-Zip: BONITA SPRINGS, FL 34133

Title: TS ( ) Delete  
Name: FIGUORA, JODI  
Address: P.O.BOX 2323  
City-St-Zip: BONITA SPRINGS, FL 34133

Title: T ( ) Delete  
Name: JACOBS, LISA  
Address: P.O.BOX 2323  
City-St-Zip: BONITA SPRINGS, FL 34133

Title: T ( ) Delete  
Name: WOLTERS, BEN  
Address: P.O.BOX 2323  
City-St-Zip: BONITA SPRINGS, FL 34133

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TV (X) Change ( ) Addition  
Name: HORNE, DENISE  
Address: P.O.BOX 2323  
City-St-Zip: BONITA SPRINGS, FL 34133

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: DENISE HORNE

TREA

05/05/2004

Electronic Signature of Signing Officer or Director

Date