2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 29, 2004
Secretary of State

DOCUMENT# N03000008528

Entity Name: DEEP CREEK RIVER RATS CORP.

Current Principal Place of Business:

229 SUNNYTOWN RD
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

229 SUNNYTOWN RD
CASSELBERRY, FL 32707

New Mailing Address:

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

Name and Address of Current Registered Agent:

NEWELL, JOHN R
229 SUNNYTOWN RD
CASSELBERRY, FL 32707 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:	PRES	( ) Delete
Name:	NEWELL, JOHN R	
Address:	229 SUNNYTOWN RD	
City-St-Zip:	CASSELBERRY, FL 32707	
Title:	VP	( ) Delete
Name:	NEWELL, CHALES R	
Address:	229 SUNNYTOWN RD	
City-St-Zip:	CASSELBERRY, FL 32707	
Title:	SECT	( ) Delete
Name:	SMITH, STEVE	
Address:	PO BOX 6215	
City-St-Zip:	OVIEDO, FL 32765	
Title:	TRES	( ) Delete
Name:	ADAMS, BRIAN	
Address:	908 FIELD ST	
City-St-Zip:	OVIEDO, FL 32765	

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: STEVE SMITH SECT 07/29/2004
Electronic Signature of Signing Officer or Director — Date