

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2004 8:00 am
Secretary of State

09-02-2004 90072 014 *****70.00

DOCUMENT # N39949

1. Entity Name
FISHIN' KIDS STAY CLEAN, INC.



Principal Place of Business
**PO BOX 542133
LAKE WORTH, FL 33463-2133 US**

Mailing Address
**PO BOX 542133
LAKE WORTH, FL 33454-2133 US**

54071437



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08042004 Chg-NP CR2E037 (10/03)

4. FEI Number
65-0246899

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SIMUNEK, DONALD R.
4232 S. LANDAR DR
LAKE WORTH, FL 33463**

Name **DON SIMUNEK**

Street Address (P.O. Box Number is Not Acceptable)

4175 North Landar Dr.

City **Lake Worth**

FL

33463

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VPD** ☐ Delete
NAME **FINEBURG, LINDA**
STREET ADDRESS **4232 S LANDAR DR**
CITY-ST-ZIP **LAKE WORTH, FL 33463**

TITLE **ED** ☐ Delete
NAME **SIMUNEK, DONALD R.**
STREET ADDRESS **4252 S LANDAR DR**
CITY-ST-ZIP **LAKE WORTH, FL 33463**

TITLE **PA** ☐ Delete
NAME **KOENIG, JOHN J.**
STREET ADDRESS **1551 FORUM PL, PO DRAW 3948**
CITY-ST-ZIP **WEST PALM BEACH, FL**

TITLE **CCD** ☐ Delete
NAME **KEISER, WILLIAM**
STREET ADDRESS **4125 PALM FOREST DR., SOUTH**
CITY-ST-ZIP **DELRAY BEACH, FL 33445**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **ADMINISTRATOR** ☐ Change ☒ Addition
NAME **CATHY VIC**
STREET ADDRESS **1160 LAKE CLARKE DRIVE**
CITY-ST-ZIP **WEST PALM BEACH, FL 33406**

TITLE **ED** ☒ Change ☐ Addition
NAME **SIMUNEK, DONALD R.**
STREET ADDRESS **4175 North Landar Cir.**
CITY-ST-ZIP **LAKE WORTH, FL 33463**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change
NAME **CCD KEISER, WILLIAM**
STREET ADDRESS **2301 CRANBROOK DR. EAST**
CITY-ST-ZIP **BOYNTON BEACH, FL 33437**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-31-04