

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46563

FILED
Apr 14, 2004
Secretary of State**Entity Name:** OPERATION FIREBALL, INC.**Current Principal Place of Business:**P.O.BOX 560822
ORLANDO, FL 328560822 US**New Principal Place of Business:****Current Mailing Address:**P.O.BOX 5608228
ORLANDO, FL 328560822 US**New Mailing Address:****FEI Number:** 59-3096477**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**REGISTERED AGENT LEGAL SERVICES, INC
1333 NORTH DUVAL STREET
TALLAHASSEE, FL 32302 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: VPD () Delete
Name: HOGGATT, GREG
Address: 7869 SHELLBARK DR.
City-St-Zip: ORLANDO, FL 32818Title: SD () Delete
Name: HOULE, SUE
Address: 3165 SHALLOWFORD ST
City-St-Zip: DELTONA, FL 32738Title: SD () Delete
Name: PARKER, MIKE
Address: 488 FT. SMITH BLVD
City-St-Zip: DELTONA, FL 32738Title: PD () Delete
Name: TUTEN, RANDY
Address: 434 JERSEY ST.
City-St-Zip: ORLANDO, FL 32806Title: TD (X) Delete
Name: WUNDERLY, TAMMY
Address: 21457 JINGLE RD
City-St-Zip: CHRISTMAS, FL 32709**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: HOGGATT, GREG
Address: 205 TRAIL BRIDGE COURT
City-St-Zip: WINTER GARDEN, FL 34787Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: TD (X) Change () Addition
Name: PARKER, MIKE
Address: 488 FT. SMITH BLVD
City-St-Zip: DELTONA, FL 32738Title: VPD (X) Change () Addition
Name: WUNDERLY, TAMMY
Address: 21457 JINGLE ROAD
City-St-Zip: CHRISTMAS, FL 32709Title: () 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: SUZANNE HOULE

SD

04/14/2004

Electronic Signature of Signing Officer or Director

Date