


2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N9300000441875						FILED SECRETARY OF STATE DIVISION OF CORPORATION 04 JUL 19 PM 4:17			
1. Entity Name NASGRASS, INC.				Principal Place of Business PO BOX 642 ALVA, FL 33920 US				Mailing Address PO BOX 642 ALVA, FL 33920 US	
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.				07052004 Chg-NP CR2E037 (10/03)	
City & State				City & State				4. FEI Number 65-0444801	
Zip		Country		Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KIRKWOOD, ROBERT S 3922 W DOUBLE J ACRES RD ALVA, FL 33920						7. Name and Address of New Registered Agent Name Jerry E. Gilbert Street Address (P.O. Box Number is Not Acceptable) 12109 Platano Drive City Punta Gorda FL Zip Code 33955			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>						300039907173 02/05/04 - 01046 - 003 ***70.00 <small>(NOTE: Registered Agent signature required when reinstating)</small>			
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS						11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC MILLER, MIKE 18230 LYNDHURST LN ALVA, FL 33920 <input checked="" type="checkbox"/> Delete					TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC Sidney Whiteside 4310 Hall Avenue Sebring FL 33875 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WHITESIDE, SIDNEY 4310 HALL AVE SEBRING, FL 33875 <input checked="" type="checkbox"/> Delete					TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Brian Mount 1908 Wanda Avenue North Lehigh Acres FL 33971 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HUNT, SUSAN J 14990 ORANGE RIVER ROAD FT MYERS, FL 33905 <input type="checkbox"/> Delete					TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rich Demuzzio 28240 Deer Run NW Labelle, FL 33935 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KIRKWOOD, ROBERT S 3922 W DOUBLE J ACRES RD ALVA, FL 33920 <input checked="" type="checkbox"/> Delete					TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Jerry E. Gilbert 12109 Platano Drive Punta Gorda FL 33955 <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIRKWOOD, JOHN 528 PEERLESS CIR LEHIGH ACRES, FL 33936 <input checked="" type="checkbox"/> Delete					TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Doc Kuhfeldt 5734 Rilma Avenue Sarasota FL 34234 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete					TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Becky Kuhfeldt 5734 Rilma Avenue Sarasota FL 34234 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
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: <u>Jerry E. Gilbert</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>						7/12/04 941-639-9309 <small>Date Daytime Phone #</small>			