

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90265 038 ****61.25

DOCUMENT # N94000001897

1. Entity Name
SPRINGFEST, INC.



Principal Place of Business
25 WEST CEDAR ST.
SUITE 510
PENSACOLA, FL 32501 US

Mailing Address
30 SOUTH SPRING STREET
PENSACOLA, FL 32501

J4U76263



2. Principal Place of Business
30 SOUTH SPRING ST
Suite, Apt. #, etc.

3. Mailing Address
6160 N. DAVIS HWY
Suite, Apt. #, etc.

04272004 Chg-NP CR2E037 (10/03)

City & State
PENSACOLA, FL
Zip
32501

City & State
PENSACOLA, FL
Zip
32504

4. FEI Number
59-3237865
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

8. Name and Address of Current Registered Agent

BOOKMAN, ALAN B
30 SOUTH SPRING STREET
PENSACOLA, FL 32501

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 May 1, 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
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
CARSON, ED
2616 N. 12TH AVENUE
PENSACOLA, FL 32503 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
KELLY, DONNIE
510 RESERVATION AVE
PENSACOLA, FL 32507 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
RIDDLE, NANCY
30 SOUTH SPRING STREET
PENSACOLA, FL 32501 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
YOUNG, CHUCK
30 SOUTH SPRING STREET
PENSACOLA, FL 32501 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DC
CLOWE, PAUL
9102 MOROSO DRIVE
PENSACOLA, FL 32506 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
HARRIS, KELLY
4025 MONTALVO DR
PENSACOLA, FL 32504 ☐ Change ☒ Addition

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
SEARS, WILLIAM
6160 N DAVIS HWY, SUITE 7
PENSACOLA, FL 32504 ☐ Change ☒ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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: *William J. Sears*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/04 850-479-1640

Date

Daytime Phone #