2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004
Secretary of State

DOCUMENT# N97000001946

Entity Name: ODYSSEY STAGE CORPORATION

Current Principal Place of Business:

616 EXECUTIVE CENTER DRIVE
SUITE 201
WEST PALM BEACH, FL 334014944

New Principal Place of Business:

208 E. LAKE HOWARD DR.
SUITE 402
WINTER HAVEN, FL 338813147 US

Current Mailing Address:

616 EXECUTIVE CENTER DRIVE
SUITE 201
WEST PALM BEACH, FL 334014944

New Mailing Address:

208 E. LAKE HOWARD DR.
SUITE 402
WINTER HAVEN, FL 338813147 US

FEI Number: 65-0752526 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DUPONT, ISRAEL
616 EXECUTIVE CENTER DR. #201
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

DUPONT, ISRAEL
208 E. LAKE HOWARD DR.
#402
WINTER HAVEN, FL 338813147 US

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: ______________________________ 04/20/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BLAKE, KEVIN
Address: 126 MANCHA AVE.
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D ( ) Delete
Name: CHILLINGWORTH, CHARLES C
Address: 257 GRANADA ROAD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Delete
Name: DUPONT, ISRAEL
Address: 616 EXECUTIVE CENTER DRIVE, #201
City-St-Zip: WEST PALM BEACH, FL 334014944

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: DUPONT, ISRAEL
Address: 208 E. LAKE HOWARD DR., #402
City-St-Zip: WINTER HAVEN, FL 338813147

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: ISRAEL DUPONT DIR. 04/20/2004
Electronic Signature of Signing Officer or Director — Date