2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 01, 2004 8:00 am Secretary of State 03-01-2004 90056 049 ****61.25

1. Entity Nam	MENT # N98000005598			03-01	-2004 90056 049 ****6	1.25	
802 11TH ST W 1 BRADENTON, FL 34205 S		ailing Address 301 SIXTH AVE W JUITE 600 BRADENTON, FL 34205 US			94023025		
7 m m							
2. Principal P	lace of Business 3. N	Mailing Address			######################################		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01092004 Chg-l	······································		
Ciry & State		City & State		4. FEI Number 65-0867039	 -}-	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status	Desired Sa.75 A		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent							
BLALOCK, LANDERS, WALTERS & VOGLER, P.A.		Name	-				
802 11TH ST W BRADENTON, FL 34205			Street A	Street Address (P.O. Box Number is Not Acceptable)			
	•		City	•	FL Zip Co	de	
	named entity submits this statement for the plions of registered agent.	urpose of changing its r	registered office of	registered agent, or both, in the	State of Florida. I am familiar with	n, and accept	
SIGNATURE .	Signature, typed or printed name of registereo agent and title i	applicable. (NOTE:	Registered Agent signati	ire required when (sinstating)	DATE		
	Filing Fee is \$61.25 9. Election Campaign F. Due by May 1, 2004 Trust Fund Contributi			,	*****		
			paign Financing	\$5.00 May Be Added to Fees	Make check payable Florida Department of	to State	
10.		Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make check payable	State	
TITLE	OFFICERS AND DIRECTO	Trust Fund Co	spaign Financing ontribution.	\$5.00 May Be Added to Fees	Make check payable Florida Department of	N 10	
TITLE NAME	OFFICERS AND DIRECTO TD THOMAS, KEN	Trust Fund Co	paign Financing ontribution. 11. TITLE NAME	\$5.00 May Be Added to Fees	Make check payable Florida Department of	N 10	
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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.

2/27/04

941-747-4483