

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000002794

FILED
Apr 23, 2004
Secretary of State

Entity Name: CENTRAL FLORIDA WATERSPORTS, INC.

Current Principal Place of Business:

4102 BOB WHITE CT
SAINT CLOUD, FL 34772

New Principal Place of Business:

Current Mailing Address:

4069 13TH ST, PMB 330
SAINT CLOUD, FL 34769

New Mailing Address:

FEI Number: 59-3615449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENKEN, KORY R
4102 BOB WHITE CT
SAINT CLOUD, FL 34772

Name and Address of New Registered Agent:

BENKEN, MINDY A
4069 13TH ST. PMB 330
SAINT CLOUD, FL 34769

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: MINDY BENKEN

04/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BENKEN, KORY R
Address: 5795 PARKVIEW PT DR
City-St-Zip: ORLANDO, FL 32821

Title: VP () Delete
Name: BENKEN, MINDY
Address: 4102 BOB WHITE CT
City-St-Zip: SAINT CLOUD, FL 34772

Title: T (X) Delete
Name: LANE, SPENCER D
Address: 5795 PARKVIEW PT DR
City-St-Zip: ORLANDO, FL 32821

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BENKEN, KIM R
Address: 4102 BOB WHITE CT.
City-St-Zip: SAINT CLOUD, FL 34772

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

Title: () 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MINDY BENKEN

VP

04/23/2004

Electronic Signature of Signing Officer or Director

Date