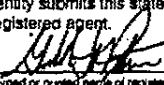
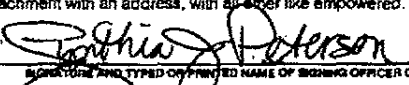


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000024338		
1. Entity Name CHARACTER PITCH, INC.		
Principal Place of Business 1437 DAVIS DRIVE FT. MYERS, FL 33919		Mailing Address 1437 DAVIS DRIVE FT. MYERS, FL 33919
DO NOT WRITE IN THIS SPACE		
8. Name and Address of Current Registered Agent PETERSON, GERALD D 1437 DAVIS DRIVE FT. MYERS, FL 33919		DO NOT WRITE IN THIS SPACE
9. 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 state if applicable.		DATE (NOTE: Registered Agent signature required when reinstating)
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PETERSON, GERALD D 1437 DAVIS DR FORT MYERS, FL 33919	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PETERSON, CYNTHIA J 1437 DAVIS DR FORT MYERS, FL 33919	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 607, 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Cynthia J. Peterson		Date 239-479-3700 Daytime Phone #



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0991834	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

U00000149098
05/03/04-80174-001 150.00

**DO NOT WRITE
IN THIS SPACE**