

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000038326

FILED
Apr 24, 2004
Secretary of State

Entity Name: CYBERSPACE HOMESITES & ASSOCIATES INC.

Current Principal Place of Business:

950 LEVIT PARKWAY
ROCKLEDGE, FL 32995

New Principal Place of Business:

950 LEVIT PARKWAY
ROCKLEDGE, FL 32955

Current Mailing Address:

950 LEVIT PARKWAY
ROCKLEDGE, FL 32995

New Mailing Address:

PO BOX 560017
ROCKLEDGE, FL 32956

FEI Number: 59-3686739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHARLES, SCHUERGER L
950 LEVITT PARKWAY
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHUERGER, CHARLES L
Address: POST OFFICE BOX 560017
City-St-Zip: ROCKLEDGE, FL 329560017

Title: D () Delete
Name: SCHUERGER, HELEN
Address: POST OFFICE BOX 560017
City-St-Zip: ROCKLEDGE, FL 329560017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHARLES L. SCHUERGER

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04/24/2004

Electronic Signature of Signing Officer or Director

Date