2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2004
Secretary of State

DOCUMENT# P00000044714

Entity Name: SUSAN & WAYNE VALSECCHI, INC.

Current Principal Place of Business:

2868 RUSTIC OAK DRIVE
PALM HARBOR, FL 34684

New Principal Place of Business:

2612 WOOD POINTE DR
HOLIDAY, FL 34691

Current Mailing Address:

2868 RUSTIC OAK DRIVE
PALM HARBOR, FL 34684

New Mailing Address:

2612 WOOD POINTE DR.
HOLIDAY, FL 34691

FEI Number: 59-3647685 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VALSRCCHI, WAYNE V
2868 RUSTIC OAK DRIVE
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

VALSECCHI, WAYNE V
2612 WOOD POINTE DR.
HOLIDAY, FL 34691 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: WAYNE VALSECCHI 04/10/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: VALSECCHI, SUSAN M
Address: 2868 RUSTIC OAK DRIVE
City-St-Zip: PALM HARBOR, FL 34684

Title: STD ( ) Delete
Name: VALSECCHI, WAYNE V
Address: 2868 RUSTIC OAK DRIVE
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: VALSECCHI, SUSAN M
Address: 2612 WOOD POINTE DR
City-St-Zip: HOLIDAY, FL 34691

Title: STD (X) Change ( ) Addition
Name: VALSECCHI, WAYNE V
Address: 2612 WOOD POINTE DR.
City-St-Zip: HOLIDAY, FL 34691

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: WAYNE VALSECCHI VP 04/10/2004
Electronic Signature of Signing Officer or Director Date