2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P00000062983

the obligations of registered agent.

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

MCCALLUM, SARA M

3138 TANGLEWYLDE AVE

3138 TANGLEWYLDE AVE

LAKE PLACID FL 33852

LAKE PLACID FL 33852

MCCALLUM, JOHN M

Make Check Payable to Florida Department of State

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

SIGNATURE

10.

TITLE

NAME

TITLE

NAME

TITLE

TITLE

NAME STREET ADDRESS

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

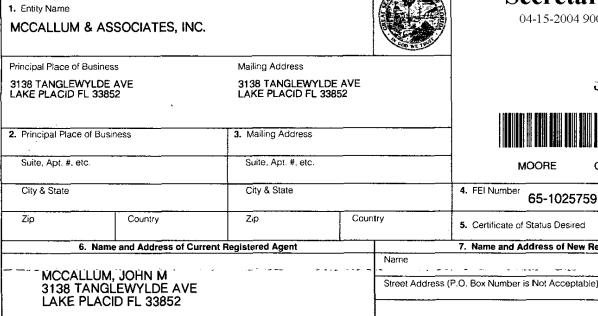
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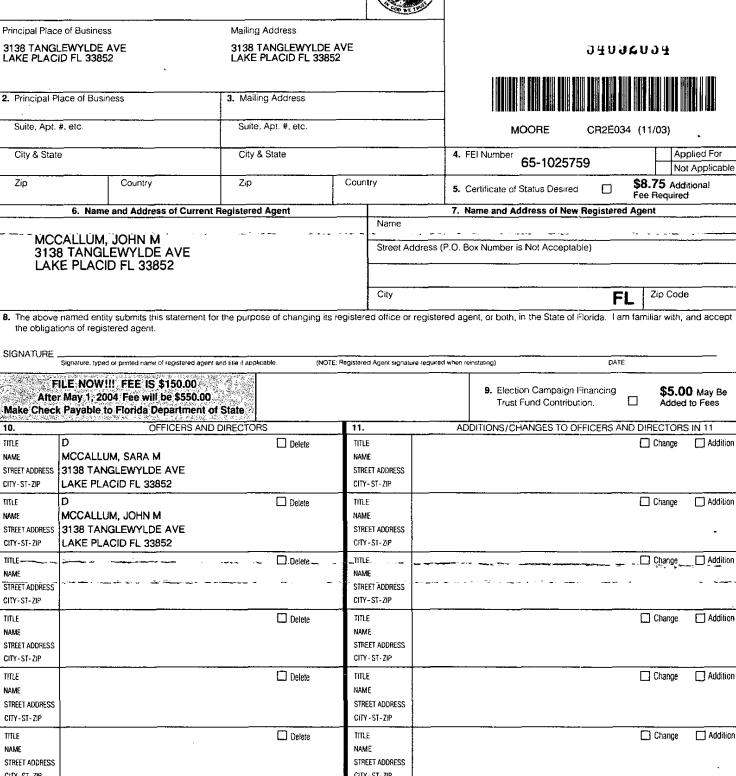
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FILED Apr 15, 2004 8:00 am Secretary of State

04-15-2004 90019 017 ***150.00



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.

City

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

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SIGNATURE:

JOHN MCCALLUM TED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/04