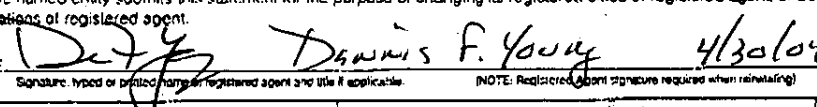
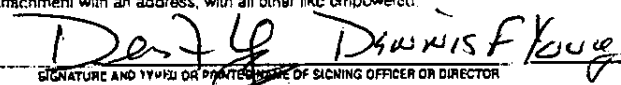


Apr. 30. 2004 12:43PM

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90252 045 ***150.00

DOCUMENT # P00000074066			
1. Entity Name DENNIS YOUNG & ASSOCIATES, INC.			
Principal Place of Business 800 CELEBRATION AVENUE 228 CELEBRATION, FL 34747		Mailing Address 800 CELEBRATION AVENUE 228 CELEBRATION, FL 34747	
2. Principal Place of Business 800 CELEBRATION AVENUE		3. Mailing Address 800 CELEBRATION AVENUE	
Suite, Apt. #, etc. STE # 228		Suite, Apt. #, etc. STE # 228	
City & State CELEBRATION, FL		City & State CELEBRATION, FL	
Zip 34747 - Country U.S.		Zip 34747 Country U.S.	
4. FEI Number 59-3666919		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent YOUNG, DENNIS F 800 CELEBRATION AVENUE 228 CELEBRATION, FL 34747		7. Name and Address of New Registered Agent Name YOUNG DENNIS F Street Address (P.O. Box Number is Not Acceptable) 800 CELEBRATION AVENUE, STE # 228 City CELEBRATION FL Zip Code 34747	
8. 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  Dennis F. Young 4/30/04 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE			
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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete D YOUNG, DENNIS F 800 CELEBRATION AVE # 228 CELEBRATION, FL 34747	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition D YOUNG, DENNIS F 800 CELEBRATION AVENUE, STE # 228 CELEBRATION FL 34747.
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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:  Dennis F. Young 4/30/04		321-228-7353	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	