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Lloyd Murray

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# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 29, 2004 08:00 AM**  
**Secretary of State**

|                                         |                                                                                   |
|-----------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # P00000095093</b>          |  |
| 1. Entity Name<br><b>WISTERIA, INC.</b> |                                                                                   |

Principal Place of Business  
**221 EAST ZARAGOSA ST.  
PENSACOLA, FL 32501**

Mailing Address  
**P.O. BOX 10062  
PENSACOLA, FL 32524-0062**

**DO NOT WRITE IN THIS SPACE**



07262004 No Chg-P CR2E034 (10/03)

|                                                                         |                                                        |
|-------------------------------------------------------------------------|--------------------------------------------------------|
| 4. FEI Number<br><b>59-3673379</b>                                      | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired<br><input checked="" type="checkbox"/> | <b>\$8.75</b> Additional Fee Required                  |

**6. Name and Address of Current Registered Agent**

**CLEVELAND-MORELLI, KAREN A  
221 EAST ZARAGOSA ST.  
PENSACOLA, FL 32501**

**DO NOT WRITE  
IN THIS SPACE**

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 *Karen A. Cleveland-Morelli*

(NOTE: Registered Agent signature required when changing agent)

*July 27, 2004*

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

|                |                            |
|----------------|----------------------------|
| TITLE          | P                          |
| NAME           | CLEVELAND-MORELLI, KAREN A |
| STREET ADDRESS | 221 EAST ZARAGOSA ST.      |
| CITY-ST-ZIP    | PENSACOLA, FL 32502        |

|                |  |
|----------------|--|
| TITLE          |  |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |

|                |  |
|----------------|--|
| TITLE          |  |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |

|                |  |
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| TITLE          |  |
| NAME           |  |
| STREET ADDRESS |  |
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| NAME           |  |
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| TITLE          |  |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |

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**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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: *Karen A. Cleveland-Morelli* *Karen A. Cleveland-Morelli* *July 27, 2004*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature