


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000096950</b> 1. Entity Name <b>SNELL PUBLISHING, INC.</b>	
---	---

Principal Place of Business <b>10608 US 41 NORTH PALMETTO, FL 34221</b>	Mailing Address <b>10608 US 41 NORTH PALMETTO, FL 34221</b>
--	--

**DO NOT WRITE IN THIS SPACE**



04282004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-1052311</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**SNELL, J R  
10608 US 41 NORTH  
PALMETTO, FL 34221**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
---	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SNELL, MARVIS R 10608 US 41 NORTH PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD SNELL, RANDOLPH R 10608 US 41 NORTH PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD SNELL, J. RANDOLPH 10608 US 41 NORTH PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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)(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: *Marvis R. Snell* MARVIS R. SNELL Apr 28, 2004**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #